Annual Report

to the

North Carolina Department of Health and Human Services

Division of Social Services

on the

Family Reunification Programs

for State Fiscal Year 2005

Table of Contents

List of Tables

List of Figures

Executive Summary

This report presents data and findings on North Carolina's Family Reunification Services (FRS) Program from State Fiscal Year 2004 – 2005 (SFY 2005), a comparison to families served during the previous six years of the FRS Program (SFY 1999 through SFY 2004), and on a five-year history of families served SFY 2001 through SFY 2005. This is the first report on the FRS program, and it presents general findings and trends since the program began. In-depth analyses will be undertaken as a part of future annual reports, in response to administrative and program response to this report.

Since the Family Reunification Services program began in 1999, it has served 468 families through 24 FRS programs across 41 counties. These families comprise 670 caregivers and 921 children. The number of families served has increased each year since SFY 2001, with the exception of a small decline during SFY 2005, averaging 86 families served a year.

Treatment outcomes are favorable among families served by FRS programs, although reunification rates are below the national standards set by the Children's Bureau under the states' Child and Family Service Reviews. At the time of case closure, 43% of children served during the last seven years were living in the home and an additional 21% were living with relatives. Thus, a combined total of 64% of children were living with parents or relatives, compared to only 45% of children living with family members at case opening. However, at the time of case closure, 27% percent of children were living in foster care, and 4% were living in a group home setting. The data reveal that at the time of case closure only 36% of families had experienced the successful reunification of *all* children in the home indicating that in many families some, but not all, children are reunited with parents. However, 13% of the families not intact at the time of case closure had a reunification pending at the next court date.

Measures of internal consistency (Cronbach's alphas) are respectable for the NCFAS-R Version R2.0, as used by the FRS providers. The data collected indicate the FRS interventions are capable of improving family functioning across all measured domains, with 50% to 70% of families rated at "baseline or above" at case closure across the seven domains, compared to only 25% to 40% of families at case opening. Further, the validity of the scale is supported by findings that the measured improvements in family functioning are statistically significantly associated with family reunification.

Over the 5 years covered in this report, there has been a shift in the types of families served, although this shift does not appear to have influenced reunification rates. Beginning in SFY 2002, there has been a rapid decline in the proportion of identified caretakers presenting with substance abuse problems.[1] There has been a significant and increasing proportion of minority children served over the last five years. At the same time, there has been a steady rise and then fall in the proportion of White children served that corresponds with a steady decrease and then rise in the proportion of African American children served. In recent years, the average length of service appears to have decreased and the total amount of contact hours spent with a family over the life of the case also has decreased somewhat.

A summary of key findings is presented in the last section of this report. Some of the trends exhibited in the data bear scrutiny and more detailed examination as the total number of families in the data archive increases.

---

[1] When Reunification Services were initially funded by the Division in 1999, they were funded as a pilot program called Restoring Families. A requirement for acceptance in this program was that the caretaker have an identified substance abuse problem which directly contributed to the removal of the children in question. In SFY 2002 Reunification programs were expanded across the state and the requirement for substance abuse was dropped, although some programs chose to continue to make substance abuse a part of their local program design.

Introduction

This is the first Annual Report on North Carolina's Family Reunification Services (FRS) program that presents data and information about families and children that have participated in the program. Information about the FRS program's activities and performance relating specifically to SFY 2005 are presented along-side information relating to the prior six-year operation of the FRS program. Additionally, trend data are presented for the last five years of program operation, including SFY 2005. Data that are presented graphically or in tables represent the most interesting findings from the current year, or from past years. There is also a section on Family Functioning, based upon the use of the North Carolina Family Assessment Scale for Reunification, Version R2.0, used by FRS Programs since SFY 2002.

Review of Program Design

Family Reunification Programs have discretion to implement various models of reunification that are unique to their respective communities, provided that they meet the requirements outlined in the Family Reunification Programs Policies and Standards. The program design standards of the Family Reunification Program shares many similar elements with the Non-Intensive Family Preservation Program (FPS) and the Intensive Family Preservation Services Program (IFPS). Services are time-limited, home based, focus on building strong and stable families, strive to be culturally relevant and appropriate, are available when the family needs them (i.e., during "non-traditional" work hours), and are delivered by workers with small caseloads.

Family Reunification Services are time-limited to the 15-month period beginning on the date the child is considered to have entered foster care, and service provision may not exceed 12 months. Although caseloads are expected to be small, caseworkers can serve up to 10 families at

one time depending on the intensity and duration of the program model. Children participating in FRS must be in the custody or under placement authority of the local Department of Social Services (DSS), and the parent(s) or caregiver(s) must be willing to work to achieve the goals of the DSS Case Plan. FRS providers are expected to provide services to families that include:

- Individual, group, and family counseling;

- Inpatient, residential, or outpatient substance abuse treatment services;

- Mental health services;

- Assistance to address domestic violence;

- Services to provide temporary child care and therapeutic services from families, including crisis nurseries; and

- Transportation to or from any of the services and activities listed above.

FRS providers are also required to deliver services using collaborative partnerships between the Reunification program and many community collaborators. Furthermore, caseworkers are expected to provide other therapeutic, supportive, and concrete services to families to address the specific needs of each family as outlined in their DSS Case Plan.

Program Summary for SFY 2005 Compared to SFY 1999 through SFY 2004

Since SFY 1999, North Carolina's FRS providers have served 468 families. The automated FRS case record and management information system contains detailed information on these families served. This large database provides highly reliable estimates of program trends since the system has been operating at "full capacity" for 7 years. Findings in this section are presented separately for the 118 families served during SFY 2005, and then combined for the 350 families served SFY 1999 through SFY 2004. The first two columns of data present the information collected relating to SFY 2005. The last two columns of data present the information collected from the first six years of program operation. The data are presented in this manner to offer a comparison of program activities during the current year as compared to prior years of operation, and will assist in identifying change, or lack of change, in program operation or client demographics since program inception.

Number of Families, Caretakers and Children Served

During SFY 2005, 19 FRS programs provided services to families in 36 counties throughout North Carolina. Table 1 presents a detailed list of the programs and counties served, as well as the number of families, caretakers, and children served. During SFY 2005, a total of 118 families received services that ended before July 1, 2006. There were 156 caretakers and 235 children served directly by the programs.

Table 1: Number of Families, Caretakers and Children Served by Family Reunification Programs during SFY2005, Listed by Program and County

FAMILY REUNIFICATION PROGRAM	COUNTY SERVED	FAMILIES SERVED	CARETAKERS SERVED	CHILDREN SERVED
Mountain Youth Resources—Region 1	Buncombe	15	17	26
	Graham	1	1	1
	Haywood	6	9	15
	Macon	2	4	3
	Madison	1	1	1
	Transylvania	2	4	5
Appalachian Family Innovations—Region 2	Avery	1	1	2
	Burke	1	1	2
	Caldwell	2	3	2
	Cleveland	4	5	7
Gaston County DSS—Region 2	Gaston	3	3	7
Rainbow Center, Inc.—Region 3	Wilkes	2	3	8
Appalachian Family Innovations—Region 3	Alexander	1	2	1
	Iredell	1	1	1
Community LINK—Region 3	Mecklenburg	7	8	22
Catawba County DSS—Region 3	Catawba	8	13	18
Youth Opportunities—Region 4	Forsyth	3	3	4
Community LINK—Region 4	Burke	1	1	1
	Cabarrus	7	11	15
	Davidson	2	3	5
	Rowan	2	2	3
The Family Center in Alamance—Region 5	Alamance	1	1	1
	Orange	1	1	1
	Person	2	2	5
Family Services of the Piedmont—Region 5	Guilford	13	15	16
The Family Resource Center of Raleigh, Inc.—Region 6	Chatham	2	3	4
	Durham	1	1	1
	Hoke	1	2	1
	Richmond	2	2	3
	Wake	3	6	5

FAMILY REUNIFICATION PROGRAM	COUNTY SERVED	FAMILIES SERVED	CARETAKERS SERVED	CHILDREN SERVED
Martin County Community Action, Inc.—Region 7	Bladen	2	3	3
	Cumberland	1	1	1
	Harnett	2	3	4
	New Hanover	1	1	4
	Robeson	2	2	7
Methodist Home for Children—Region 8	Wayne	7	11	14
Methodist Home for Children—Region 10	Onslow	1	2	4
Cabarrus County DSS *	Cabarrus	3	3	10
Centerpointe Mental Health *	Forsyth	1	1	2
Totals		**118**	**156**	**235**

* These two programs were not funded for SFY 2004-2005. The small number of cases represent cases that where services were begun in SFY 2003-2004 and did not conclude until after July 1, 2004.

Beginning with the inception of FRS in SFY 1999 through SFY 2004, 14 FRS programs provided services to 350 families in 22 counties throughout North Carolina. There were 514 caretakers and 686 children served directly by the programs. Table 2 presents a detailed list of the programs and counties served, as well as the number of families, caretakers, and children served.

Table 2: **Number of Families, Caretakers and Children Served by Family Reunification Programs SFY1999 thru SFY2004, Listed by Program and County**

FAMILY REUNIFICATION PROGRAM	COUNTY SERVED	FAMILIES SERVED	CARETAKERS SERVED	CHILDREN SERVED
Mountain Youth Resources—Region 1	Buncombe	6	9	9
	Cherokee	9	15	13
	Clay	2	3	4
	Graham	9	11	13
	Haywood	26	40	40
	Jackson	4	6	8
	Macon	11	20	20
	Madison	6	9	12
	Transylvania	1	2	2

FAMILY REUNIFICATION PROGRAM	COUNTY SERVED	FAMILIES SERVED	CARETAKERS SERVED	CHILDREN SERVED
Blue Ridge Mental Health	Buncombe	26	39	59
Appalachian Family Innovations—Region 2	Caldwell	17	28	37
Gaston County DSS—Region 2	Gaston	32	45	55
Cleveland County DSS	Cleveland	22	31	44
Catawba County DSS—Region 3	Catawba	30	46	57
Cabarrus County DSS	Cabarrus	9	14	29
Centerpointe Mental Health	Forsyth	22	27	42
Family Services of the Piedmont—Region 5	Guilford	17	23	30
Sandhills Mental Health	Moore	3	4	4
	Richmond	25	33	41
IRAPS/MCDS	Cumberland	34	53	86
	Harnett	15	24	38
Choanoke Area Development Assoc.	Halifax	11	13	18
Methodist Home for Children	Wayne	13	19	25
Totals		**350**	**514**	**686**

Family Information

Table 3 presents information describing families at case opening.

Table 3: Family Information at Case Opening

Family Information	SFY 2005 (N=118)		SFY 1999 – SFY 2004 (N=350)	
	Number	Percent	Number	Percent
Families that Previously Received FPS	6	5.5	5	1.7
Families that Previously Received IFPS	3	2.7	41	12.9
Strengths Identified in Families at Opening				
Eager to keep family together	103	87.3	283	80.9
Pleasant	87	73.7	241	68.9
Verbal	82	69.5	243	69.4
Caring	76	64.4	206	58.9
Responsive	75	63.6	190	54.3
Orderly/neat in person	74	62.7	199	56.9
Receptive	67	56.8	170	48.6
Interested in learning	66	55.9	173	49.4
Orderly/neat in home	65	55.1	176	50.3
Protective	57	48.3	160	45.7
Respectful of others	55	46.6	165	47.1
Employed	54	45.8	151	43.1
Resourceful	52	44.1	171	48.9
Cooperative with agency in the past	50	42.4	143	40.9
Involved in children's activities	48	40.7	126	36.0
Wants more education	48	40.7	123	35.1
Supportive, strong network of family/friends nearby	47	39.8	147	42.0
Punctual	44	37.3	136	38.9
Health	39	33.1	128	36.6
Honest	37	31.4	112	32.0
Fun loving/cheerful	33	28.0	130	37.1
Involved in children's school life	32	27.1	94	26.9
Youth oriented	28	23.7	97	27.7
Average Number of Strengths Identified per Family	11.19		10.78	
Families Currently or Ever Receiving Public Assistance	100	90.1	291	86.4
Medicaid	93	78.8	260	74.3
Food stamps	66	55.9	179	51.1
WIC	41	34.7	115	32.9
Housing	32	27.1	92	26.3
SSI	28	23.7	82	23.4
Work First	26	22.0	76	21.7
General assistance	11	9.3	42	12.0
Other services	5	4.2	25	7.1

In SFY 2005, 6% of families had previously received Family Preservation Services (compared to a third of that number in the prior six years) and 3% had previously received Intensive Family Preservation Services (compared to 13% in the prior six years). Fifty percent or more of families served presented with the following strengths identified at the time of case opening: eager to keep family together, pleasant, verbal, caring, responsive, orderly/neat in person, receptive, interested in learning, and orderly/neat in home. Similar strengths were identified in families in prior years of service. The average number of strengths identified per family increased slightly in SFY 2005. Since it is not likely that the average number of strengths possessed by families is increasing, this change more likely represents an increase in workers' capacity and skill to seek and identify strengths. The majority of families (90%) in SFY 2005 were currently receiving, or had previously received, some type of public assistance. This reliance on public assistance was found in families throughout all years of program operation.

Demographic Characteristics of "Identified" Caretakers

In SFY 2005, 140 identified caretakers were living in the homes of the 118 families served by the FRS programs. Table 4 presents demographic information for these identified caretakers. In SFY 2005, four-fifths (79%) of identified caretakers were female. The majority (71%) of identified caretakers were the mother of the children removed from the home, and 19% were identified as the children's father. The majority of identified caretakers were White (64%), 26% were African American, and 11% comprised other minority races. The average age of identified caretakers served by the program was 33 years. Nearly half (49%) of the identified caretakers were 30 years old or less, one-fifth (18%) were over the age of 40, and the remaining 33% were between 31 and 40 years old. Only 33% of identified caretakers were employed in full-time work, and one-third (31%) of identified caretakers were unemployed and in need of work. This

represents a decline in the proportion of identified caretakers that are unemployed, as compared to the prior six years of program operation. Half (49%) of all identified caretakers had less than a high school diploma. Thus, as with other human service populations where children may be at risk, factors of single parenting, insufficient income or poverty, labor force detachment or intermittent attachment, and low educational attainment are prevalent. Identified caretakers served during the prior six-year history of the program were similar with respect to gender, relationship to children removed, race, age, and educational status.

Table 4: Demographic Information for Identified Caretakers

Demographics of Identified Caretakers	SFY 2005 (N=140)		SFY 1999 – SFY 2004 (N=420)	
	Number	Percent	Number	Percent
Gender				
Male	29	20.7	110	26.2
Female	111	79.3	310	73.8
Relationship to child removed				
Mother	99	70.7	295	70.6
Father	26	18.6	95	22.7
Grandparent	5	3.6	8	1.9
Aunt/Uncle	5	3.6	0	0.0
Other	5	3.6	20	4.8
Race				
White	89	63.6	274	65.4
Black	36	25.7	121	28.9
Other	15	10.7	24	5.7
Age				
Average Age	32.66		32.21	
0-17	0	0.0	8	2.0
18-24	40	29.0	73	17.9
25-30	28	20.3	109	26.7
31-40	45	32.6	152	37.3
41-50	13	9.4	54	13.2
51-60	8	5.8	9	2.2
61+	4	2.9	3	0.7
Employment Status				
Full-time	46	32.9	126	30.0
Part-time <20 hrs	12	8.6	28	6.7
Part-time >20 hrs	9	6.4	25	6.0
Disabled	19	13.6	43	10.2
Seasonal	8	5.7	11	2.6
Unemployed	44	31.4	165	39.3
Student	2	1.4	6	1.4
Retired	3	2.1	2	0.5
Homemaker	4	2.9	20	4.8

	SFY 2005 (N=140)		SFY 1999 – SFY 2004 (N=420)	
Demographics of Identified Caretakers (Continued)	**Number**	**Percent**	**Number**	**Percent**
Educational Status				
1-5th grade	2	1.4	0	0.0
6-9th grade	15	10.9	72	17.5
10-12th grade	50	36.2	148	36.0
HS/GED	54	39.1	127	30.9
Some college	16	11.6	52	12.7
College grad	1	0.7	11	2.7
Post college	0	0.0	1	0.2
Caretaker Issues				
Child abuse/neglect	73	52.1	283	67.4
Domestic violence	54	38.6	171	40.7
Unemployment	49	35.0	151	36.0
Drug abuse	44	31.4	184	43.8
Grief/loss	37	26.4	152	36.2
Absence of parent/caretaker	35	25.0	88	21.0
Mental illness	32	22.9	79	18.8
History of teenage childbearing	31	22.1	77	18.3
Alcohol abuse	29	20.7	169	40.2
Teenage parent	21	15.0	50	11.9
History of other abuse as a child	17	12.1	74	17.6
History of sexual abuse as a child	14	10.0	80	19.0
Developmental disability	13	9.3	19	4.5
Physical chronic illness	13	9.3	33	7.9
Physical disability	8	5.7	35	8.3
Incarceration in jail or prison	6	4.3	38	9.0
Average Number of Issues Identified per Caretaker	3.52		4.11	
Caretakers with a substance abuse problem	44	32.1	240	58.0

On average, four major issues were identified per identified caretaker that affect family functioning and place the children at-risk. The most frequently occurring issues identified in SFY 2005 include child abuse/neglect, domestic violence, unemployment, drug abuse, grief/loss, absence of parent/caretaker, mental illness, history of teenage childbearing, and alcohol abuse. Similar issues were identified in identified caretakers during prior years of program operation, with the exception of issues with drug or alcohol abuse. There has been a significant decline in the proportion of identified caretakers presenting with a substance abuse problem as a result of a policy change which no longer required caretakers have a substance abuse issue to qualify for

services. In SFY 2005, one-third (32%) of identified caretakers presented with a substance abuse problem compared to 58% during previous years of service. Refer to the "Five-Year Trend Analysis" section for more information on identified caretaker issues over time.

Demographic Characteristics of "Other" Caretakers

In SFY 2005, 16 caretakers 'other' than the custodial parent(s) were living in the homes of the 118 families served by the FRS programs. Table 5 presents demographic information for these other caretakers. In SFY 2005, the majority of other caretakers (81%) were male, and two-fifths (44%) were the fathers of the children served. The majority of other caretakers were White (69%), 19% were African American, and 13% comprised other minority races. There has been a significant decrease (10%) in the percentage of White other caretakers served by the program compared to prior years. The average age of other caretakers served by the program was 34 years. Two-fifths (38%) of other caretakers were 30 years old or less, nearly one-quarter (19%) were over the age of 40, and the remaining 44% were between 31 and 40 years old. Other caretakers served during SFY 2005 were slightly younger than those served in previous years. Only 31% of other caretakers were employed in full-time work (down from 52% in previous years), and 13% of other caretakers were unemployed and in need of work (down from 27% in previous years). Most (75%) of all other caretakers had less than a high school diploma, a 27% increase from those other caretakers served in prior years. On average, three major issues were identified per other caretaker that affect family functioning and place the children at-risk. The most frequently occurring issues identified in SFY 2005 include domestic violence, alcohol and/or drug abuse, child abuse/neglect, and grief/loss. Similar issues were identified in other caretakers during prior years of program operation.

Table 5: Demographic Information for Other Caretakers

Demographics of Other Caretakers	SFY 2005 (N=16)		SFY 1999 – SFY 2004 (N=94)	
	Number	Percent	Number	Percent
Gender				
Male	13	81.3	60	65.2
Female	3	18.8	32	34.8
Relationship to child removed				
Mother	3	18.8	14	15.6
Father	7	43.8	50	55.6
Grandparent	1	6.3	11	12.2
Aunt/Uncle	1	6.3	1	1.1
Other	4	25.0	14	15.6
Race				
White	11	68.8	72	78.3
Black	3	18.8	17	18.5
Other	2	12.5	3	3.3
Age				
Average Age	34.00		37.64	
0-17	0	0.0	0	0.0
18-24	2	12.5	9	10.8
25-30	4	25.0	13	15.7
31-40	7	43.8	36	43.4
41-50	2	12.5	17	20.5
51-60	1	6.3	2	2.4
61+	0	0.0	6	7.2
Employment Status				
Full-time	5	31.3	49	52.1
Part-time <20 hrs	2	12.5	2	2.1
Part-time >20 hrs	2	12.5	2	2.1
Disabled	1	6.3	8	8.5
Seasonal	1	6.3	2	2.1
Unemployed	2	12.5	25	26.6
Student	0	0.0	0	0.0
Retired	1	6.3	3	3.2
Homemaker	2	12.5	1	1.1
Educational Status				
1-5th grade	0	0.0	1	1.2
6-9th grade	7	43.8	14	16.9
10-12th grade	5	31.3	25	30.1
HS/GED	4	25.0	29	34.9
Some college	0	0.0	12	14.5
College grad	0	0.0	1	1.2
Post college	0	0.0	1	1.2
Caretaker Issues				
Domestic violence	8	50.0	42	44.7
Drug abuse	7	43.8	35	37.2
Child abuse/neglect	7	43.8	34	36.2
Grief/loss	7	43.8	24	25.5
Alcohol abuse	5	31.3	38	40.4
Mental illness	3	18.8	3	3.2

	SFY 2005 (N=16)		SFY 1999 – SFY 2004 (N=94)	
Demographics of Other Caretakers (Continued)	Number	Percent	Number	Percent
Caretaker Issues (continued)				
Unemployment	3	18.8	20	21.3
Absence of parent/caretaker	2	12.5	17	18.1
Developmental disability	2	12.5	3	3.2
History of other abuse as a child	2	12.5	9	9.6
Incarceration in jail or prison	2	12.5	10	10.6
Physical disability	1	6.3	12	12.8
Teenage parent	1	6.3	4	4.3
History of teenage childbearing	0	0.0	5	5.3
Physical chronic illness	0	0.0	6	6.4
History of sexual abuse as a child	0	0.0	2	2.1
Average number of issues identified per caretaker	3.25		2.95	
Caretakers with a substance abuse problem	7	43.8	30	37.0

Substance Abuse Risk Tool

Data presented in the previous two sections indicated that 321 caretakers (47%) presented with substance abuse problems. When a caretaker has a known substance abuse problem, caseworkers completed a Substance Abuse Risk Tool pre-test (at case opening) and post-test (at case closing). These data are presented in Table 6 for all caretakers served by the FRS program during the full seven years of program operation (note that pre-test and post-test data are not available for every caretaker.)

The data collected indicated that 71% of caretakers were in a substance abuse treatment program when the services began. At the time of case closure, only 51% of caretakers were still in a treatment program. When attending a program, the majority of caretakers attend 1 – 2 times per week. At case opening, caseworkers rated the caretaker's potential for relapse and more than half (55%) were rated as somewhat likely or very likely to have a relapse. This proportion decreased slightly to 45% by case closure. One-third of caretakers had had experienced a relapse at case opening, and by case closure that proportion increased to 56%. The majority of

caretakers (61%) had problems with alcohol, and nearly half had problems with

marijuana/hashish (48%) and cocaine (43%).

Table 6:   Substance Abuse Risk Tool (for caretakers with a substance abuse problem)

Substance Abuse Risk Tool	Pre-Test (N=228)		Post-Test (N=179)	
	Number	Percent	Number	Percent
Caretakers in a SA treatment program	146	70.5	87	51.2
How often does caretaker attend SA program				
1-2 times per week	114	77.6	98	83.1
3-4 times per week	17	11.6	11	9.3
5-6 times per week	7	4.8	5	4.2
7+ times per week	9	6.1	4	3.4
Caretaker's potential for relapse				
Very likely	54	27.1	48	30.6
Somewhat likely	55	27.6	23	14.6
Likely	40	20.1	27	17.2
Somewhat unlikely	42	21.1	40	25.5
Very unlikely	8	4.0	19	12.1
Caretakers that have had a relapse	66	33.7	89	55.6
Substances Used				
Alcohol	139	61.0	71	39.7
Marijuana/hashish	110	48.2	43	24.0
Cocaine	98	43.0	43	24.0
Prescription drugs	36	15.8	27	15.1
Methamphetamines	10	4.4	6	3.4
Tranquilizers/barbiturates	10	4.4	5	2.8
Heroin	6	2.6	0	0.0
Other substances	5	2.2	3	1.7
Hallucinogens	4	1.8	1	0.6
Inhalants	3	1.3	0	0.0
Caretakers currently using prescription drugs	57	29.2	50	31.3
Caretakers who have avoided drug-using friends/family/places while in treatment	95	50.8	72	48.6
Caretakers that can identify at least 1 close adult relative not chemically dependent	175	88.8	137	86.7
Caretakers that can identify at least 1 close adult non relative not chemically dependent	123	86.0	95	86.4
Number of treatment programs participated in				
One	105	68.2	104	77.0
Two	32	20.8	24	17.8
Three or more	17	11.0	7	5.2

An additional 16% of caretakers had problems with prescription drug use. These proportions decreased by the time of case closure. Only half of caretakers were able to avoid drug-using friends, family or places while in treatment. However, the majority of caretakers were able to identify at least one close adult relative and one close adult non-relative that were not chemically dependent. Two-thirds (68%) of caretakers had participated in only one treatment program at case opening, and this proportion increased to 77% at case closing.

Demographic Characteristics of Children

In SFY 2005, 235 children were served by FRS. Table 7 presents demographic information on these children and compares them to the 686 children served prior to 2005. In SFY 2005, 51% of children served were male and 49% were female. The average age of the child was 6 years. Similar proportions were found in the children served in the prior six years of program operation. Two-fifths (45%) of the children were White and 30% were African American. Other minority children represented 25% of the children served. This demonstrates a 12% increase in the proportion of minority children (combined African American and Other Minorities) served by the FRS program when compared to prior years, on average. The majority (88%) of children were in DSS legal custody due to neglect. The most frequently cited issues placing referred children at-risk for role dysfunction include neglect, family disruption, family violence, and grief or loss. Other issues affecting between 10% and 20% of children include taking medications, being undisciplined, drug abuse, being out of parental control, and having a learning disability. Similar proportions were found in the presenting issues during the prior six years of program operation. Children averaged a total of 4 identified issues in SFY 2005, and during prior years.

Table 7:   Demographic Information for Children

Demographics of Children	SFY 2005 (N=235)		SFY 1999 – SFY 2004 (N=686)	
	Number	Percent	Number	Percent
Gender				
Male	119	50.9	357	52.3
Female	115	49.1	326	47.7
Age				
Average age	6.03		6.38	
0-5	129	54.9	316	46.9
6-12	75	31.9	272	40.4
13-15	26	11.1	67	9.9
16-17	4	1.7	18	2.7
18+	1	0.4	1	0.1
Race				
White	106	45.3	393	57.6
Black	69	29.5	200	29.3
Other	59	25.2	89	13.0
Maltreatment code (for children in DSS legal custody)				
Abuse	23	10.6	79	16.2
Neglect	189	87.5	406	83.4
Delinquent acts	4	1.9	2	0.4
Child Issues				
Neglect	161	68.5	425	62.0
Family disruption	119	50.6	425	62.0
Family violence	71	30.2	234	34.1
Grief/loss	65	27.7	282	41.1
Child taking medication	43	18.3	110	16.0
Undisciplined	30	12.8	69	10.1
Drug abuse	28	11.9	138	20.1
Out of parental control	25	10.6	80	11.7
Learning disability	24	10.2	81	11.8
BEH	22	9.4	70	10.2
Sexual abuse	21	8.9	67	9.8
Physical abuse	21	8.9	51	7.4
School failure	19	8.1	47	6.9
Developmental disability	19	8.1	52	7.6
Extreme poverty	17	7.2	21	3.1
Alcohol abuse	14	6.0	144	21.0
Emotional disability	13	5.5	46	6.7
Inappropriate sexual behavior	13	5.5	40	5.8
Runaway	12	5.1	16	2.3
Emotional abuse	11	4.7	83	12.1
Behavioral disability	10	4.3	24	3.5
Serious health problems	10	4.3	27	3.9
Physical disability	10	4.3	14	2.0
Delinquency	8	3.4	16	2.3
Truancy	7	3.0	23	3.4
Suicidal behavior	7	3.0	11	1.6
Child exploitation	4	1.7	5	0.7
Teen pregnancy	4	1.7	4	0.6
Average number of issues identified per child	3.51		3.92	

Child Living Arrangements

Table 8 presents information about child living arrangements and DSS legal custody at the time of case opening and case closing for SFY 2005 and for all prior years of program operation. There has been little change in the data for SFY 2005 as compared to prior years.

Table 8: Child Living Arrangements at Case Opening and Case Closing

	SFY 2005 (N=235)		SFY 1999 – SFY 2004 (N=686)	
Demographics of Children	**Number**	**Percent**	**Number**	**Percent**
Children in DSS legal custody at case opening	220	93.6	639	93.4
Children out-of-home >= 15 days (for children in DSS legal custody)	218	99.1	610	97.0
Children who had returned home (for children in DSS legal custody)	28	12.7	90	20.2
Living Arrangement at case opening				
Home	36	15.5	123	18.1
Relative	49	21.1	203	29.9
Family friend	4	1.7	24	3.5
Foster care	115	49.6	277	40.8
Group home	24	10.3	43	6.3
Other	4	1.7	9	1.3
Children in DSS legal custody at case closing	167	71.1	420	64.1
Living Arrangement at case closing				
Home	101	43.0	292	43.8
Relative	32	13.6	162	24.3
Family friend	1	0.4	12	1.8
Foster care	84	35.7	166	24.9
Group home	12	5.1	26	3.9
Other	5	2.1	8	1.2

In SFY 2005, 94% of children were in DSS legal custody at the time of case opening. The remaining 6% of children who were not in custody represent siblings who remained in the home. Since services are provided in a holistic manner to the entire family, all children in the household are counted as being 'served'. At case closing, although 57% of children were living at home or with relatives, 71% of children were still in DSS legal custody (slightly higher than the 64% in prior years). Most children in DSS legal custody at case opening had been placed

outside of the home for 15 or more days, and a small proportion (13%) had already been returned to the home. At case opening, 16% of children were living in the home environment, 21% were living with relatives, 50% were living in foster care, and 10% were living in a group home setting. By the time of case closing, 43% of children were living in the home environment, 14% were living with relatives, 36% were living in foster care, and 5% were living in a group home setting. The proportion of children living with relatives was down significantly from prior years, and the proportion of children living in foster care was up significantly from prior years.

Service Delivery Information

Table 9 presents regularly collected service delivery information from the 118 families served in SFY 2005 compared to the 350 families served in prior years. During SFY 2005, workers averaged 139 hours of service to each of the families during the typical service period.

Table 9: Service Delivery Information

Service Delivery Information	SFY 2005 (N=118)		SFY 1999 – SFY 2004 (N=350)	
	Average	St. Dev.	Average	St. Dev.
Average hours spent over life of case in various types of contact				
Face-to-Face, telephone, collateral & travel contact	107.52	96.95	116.79	106.43
Supervision contact	11.87	11.06	18.80	27.32
Administrative/record keeping contact	18.88	17.55	28.52	28.32
Miscellaneous contact	.64	2.78	3.61	20.62
Total contact hours	138.92	117.85	167.72	146.70
Average number of weeks over life of case family provided services				
Family assessment services	10.55	11.70	12.44	11.93
Family or individual counseling services	16.00	12.09	17.37	12.01
Client advocacy services	7.20	7.87	12.20	11.94
Case management services	12.99	10.99	16.85	13.41
Other services	2.07	5.03	4.19	7.32
Average number of weeks over the life of the case that the family was not seen for services	3.18	4.36	2.94	4.35
Average amount of money over the life of the case that the family was in need of (percent of families that were in need of some money)	311.13 (20% in need)	446.29	455.32 (36% in need)	780.44
Average amount of money over the life of the case that the family was provided (percent of families that received	311.42 (20% provided)	446.32	380.31 (35% provided)	607.76

Most of the hours, on average, were spent in face-to-face, telephone, collateral and travel contact (108 hours). About 19 hours were devoted to administrative tasks and record keeping, and about 12 hours of contact was spent providing supervision. The average hours of service provided to families was down significantly from prior years (139 hours compared to 168 hours). Nearly all families received family assessment and family or individual counseling as part of the services delivered. Nearly all families received client advocacy and case management and referral services.

In SFY 2005, FRS programs provided monetary assistance to 20% of families served and to 100% of families needing monetary assistance. This proportion was less than that of previous years where one-third (35%) of families were provided monetary assistance. In SFY 2005, the average amount of money provided to families in need was $311 (less than the $380 provided, on average, during prior years.)

Case Closure Information

Table 10 presents information collected about families served at the time of case closure. Families were more likely to be referred for other services after closure during SFY 2005 than in prior years (86% versus 75%). The average FRS case in SFY 2005 lasted 21 weeks (just over 5 months), compared to an average of 25 weeks during the prior six years of program operation. In SFY 2005, cases were less likely to close with services being completed successfully (defined as 'all children were reunified') as compared to prior years (68% versus 63%). In SFY 2005, families were more likely to experience a child placement with another court-approved person, more likely to close because the service period ended, and more likely to close because reunification efforts were ceased by the courts. Alternatively, cases were less likely to close

with a reunification pending, because the family withdrew or was consistently uncooperative

with services, and because the identified caretaker was still abusing substances and not receiving

treatment. For cases closing with a reunification pending in SFY 2005, the average number of

days from case closure to the next scheduled court date was 43 days, down from 49 days in prior

years of program operation.

Table 10: Case Closure Information

Case Closure Information	SFY 2005 (N=118)		SFY 1999 – SFY 2004 (N=350)	
	Number	**Percent**	**Number**	**Percent**
Families receiving other services at closure	102	86.4	256	74.9
Factors influencing case closure if <u>NO</u> children in family were reunified	(N=80)		(N=219)	
Child placed with other court approved person	14	17.5	25	11.4
Reunification pending	8	10.0	32	14.6
Service period ended	19	23.8	31	14.2
Family withdrew from services or was uncooperative	12	15.0	58	26.5
Caretaker not in treatment, still using	4	5.0	24	11.0
Other	6	7.5	8	3.7
Reunification efforts ceased	8	10.0	12	5.5
Child placed or risk too high	4	5.0	6	2.7
Reunification efforts not successful at closure	0	0.0	14	6.4
Unresolved caretaker issues	5	6.3	9	4.1
	Mean	**St. Dev.**	**Mean**	**St. Dev.**
Average number of days from case opening to case closure	146.04	95.27	176.96	97.05
Average number of days from case closure to court date for reunification for cases with a pending reunification	43.00	29.81	48.61	51.16

Families Not Accepted/Appropriate for Family Reunification Services

Each year many families are referred for FRS but not served. Reporting those data to the

state is optional; therefore, this information is likely an underestimate of the total number of

families that were referred for FRS and not served. Table 11 presents summary information

about the 214 families referred and not served during all seven years of program operation. Only

3% of families were denied services because caseloads were full, 8% were not served because

the child or children were not in DSS legal custody, and 10% were not served because the risk

was too high and the family needed services that are more intensive. Twenty-three percent of

families were not willing to participate in services, and 28% of families did not meet program

eligibility criteria. Three-fifths (63%) of families that did not receive services were White, 31%

were African American, and 6% were other minorities. The average number of children that had

been removed from the home was 1.73. In 13% of families, no children had been removed from

the home, thereby making the family ineligible for services.

Table 11: Families Not Accepted/Appropriate for Family Reunification Services

N=214	Number	Percent
Caretaker race		
White	130	62.8
African American	64	30.9
Other	13	6.3
Number of children removed from home		
Average number children removed per family	1.73 (SD=1.30)	
None	27	12.7
One	74	34.7
Two	69	32.4
Three or more	43	20.2
Reason family not accepted for Reunification services		
Caseloads full	7	3.3
Children not in DSS custody	16	7.5
Risk too high	22	10.4
Family not willing to participate	49	23.1
Does not meet program criteria	59	27.8
Other	59	27.8

Five-Year Trend Analysis

Since SFY 1999, North Carolina's FRS providers have served 473 families. The automated FRS case record and management information system contains detailed information on these families served. This database provides reliable estimates of program trends since the system has been operating at "full capacity" for 7 years. Findings in this section relate to the total population of families served in the last five years, SFY 2001 through SFY 2005. Five-year trend analyses of a number of variables indicate a high degree of stability, and therefore predictability, in a number of areas of interest to FRS programs, policy executives and the legislature.

When Reunification Services were initially funded by the Division, they were funded as a pilot program know as Restoring Families. There were very specific requirements for participating in the program, the most significant of which was that at least one identified caretaker was required to have a diagnosed substance abuse problem which directly contributed to the removal of the child(ren), and to be actively participating in some type of treatment program. In SFY 2002 the state expanded Reunification Services and lifted the requirement that the caretaker have a substance abuse issue. Many of the former Restoring Families programs applied for and were awarded grants at this time, and some of them chose to continue the substance abuse requirement in their local program model. However, most of the Reunification programs did not include the substance abuse component. This accounts for the reduction in cases referred for substance abuse issues, and the reduced use of the Substance Abuse Tool referred to throughout this report. Finally as a part of the re-bid of all Community Based Programs by the Division in SFY 2004, Reunification services were again put out for re-bid. At that time no programs included substance abuse as a requirement for acceptance, however, some

programs may still choose to use the Substance Abuse Tool as a part of their overall assessment strategy.

Number of Families, Caretakers and Children Served

The number of programs offering FRS services has increased substantially over the last five years, ranging from 9 to 19 programs serving 10 to 36 counties. In SFY 2005 there were 19 programs operating making services available to the entire state. Services were provided to families in 36 counties. Figure 1 presents the number of families, caretakers, and children served annually by FRS programs. The program has served an average of 86 families per year (from a low of 45 families in SFY 2001 to a high of 125 families in SFY 2004). The number of caretakers served in these families averages 123, and the number of children served in these families averages 168 per year.

Families Receiving Public Assistance

Figure 2 presents the percentage of families that are currently receiving, or have ever received, public assistance. Public assistance includes Medicaid, food stamps, housing assistance, Work First, SSI, WIC, and general assistance. The rate at which families receive public assistance has remained very stable over the last five years. The majority of families served by FRS are receiving, or have previously received, public assistance.

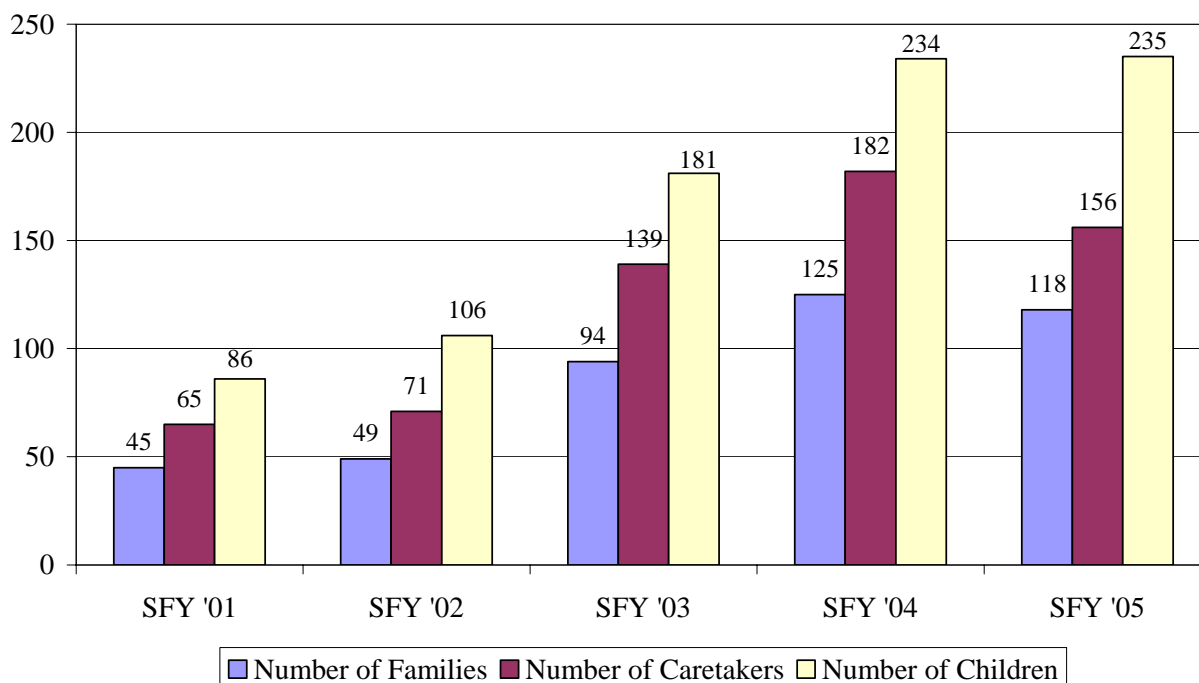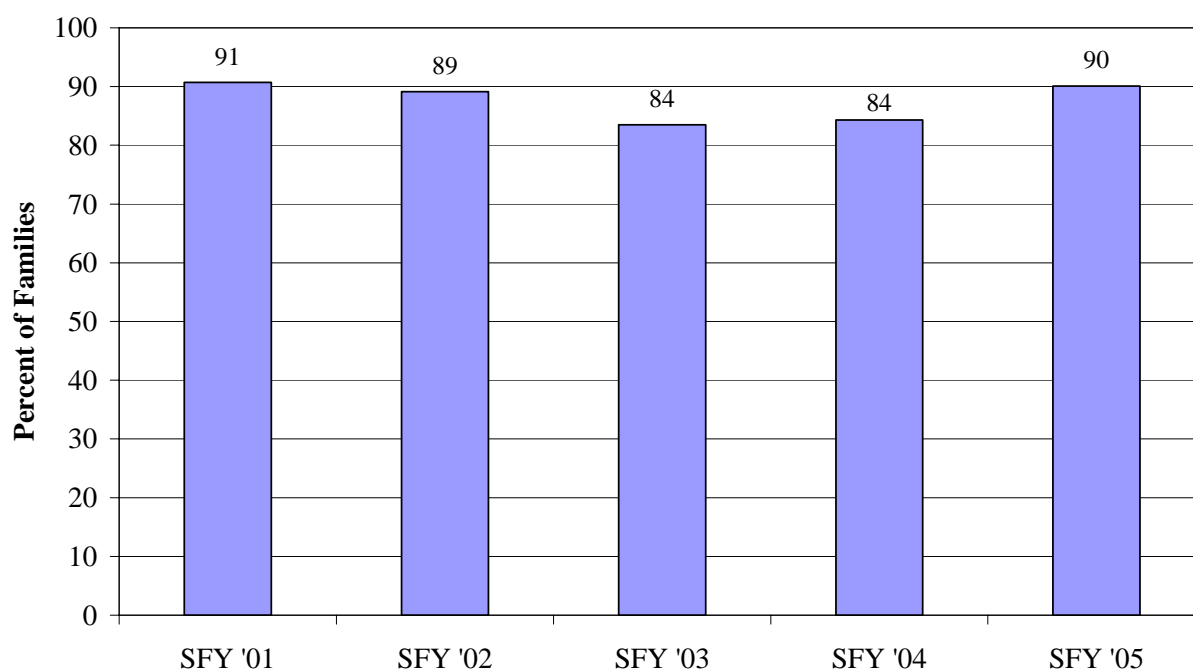## Figure 1. Number of Families, Caretakers and Children Served by Family Reunification Programs

	Number of Families	Number of Caretakers	Number of Children
SFY '01	45	65	86
SFY '02	49	71	106
SFY '03	94	139	181
SFY '04	125	182	234
SFY '05	118	156	235

Figure 2. Percent of Families Currently or Ever Receiving Public Assistance

	SFY '01	SFY '02	SFY '03	SFY '04	SFY '05
Percent of Families	91	89	84	84	90

Primary Issues Affecting Identified Caretakers

Figure 3 presents data on the types of problems affecting identified caretakers. (Note that each section of a bar represents the percent of identified caretakers experiencing a particular problem, and that identified caretakers may experience multiple problems. Therefore, the bars do not add to 100%, but represent the cumulative percentages of identified caretakers experiencing that problem in a given year).

**Figure 3. Primary Issues Affecting Identified Caretakers**
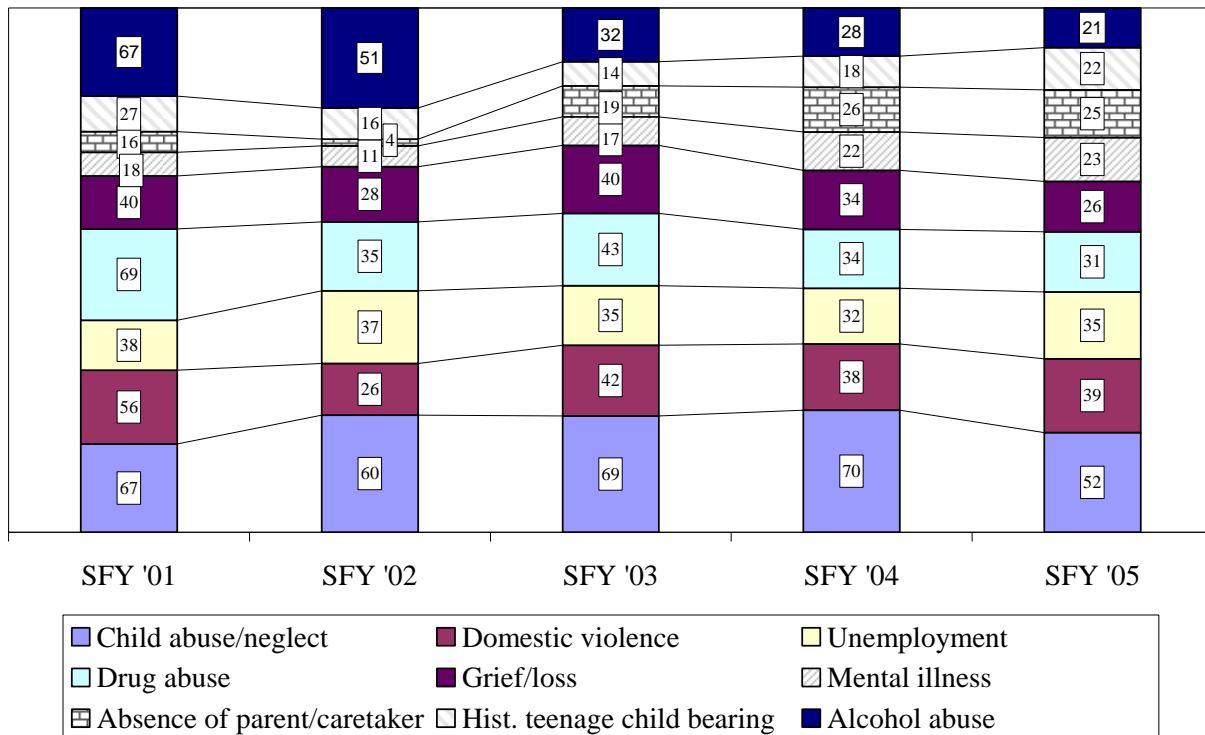
The types of problems affecting identified caretakers have fluctuated slightly over the last five years. There has been a significant and decreasing proportion of identified caretakers presenting with problems relating to alcohol and/or other drug abuse problems, and grief and loss issues. Alternatively, there has been an increasing proportion of identified caretakers presenting with the problem of the absence of a parent or caretaker. The proportion of identified

caretakers presenting with problems of child abuse and neglect, domestic violence, unemployment, mental illness, and history of teenage child bearing have remained fairly stable over the last five years.

Identified Caretakers with a Substance Abuse Problem

Figure 4 presents data on the proportion of identified caretakers presenting with a substance abuse problem. Due to the changes in the program model, there has been a significant and decreasing proportion of identified caretakers with substance abuse problems. In SFY 2001, nearly all (98%) of identified caretakers presented with a substance abuse problem. By SFY 2005, only one-third (32%) of identified caretakers presented with a substance abuse problem.

Figure 4. Percent of Identified Caretakers with a Substance Abuse Problem
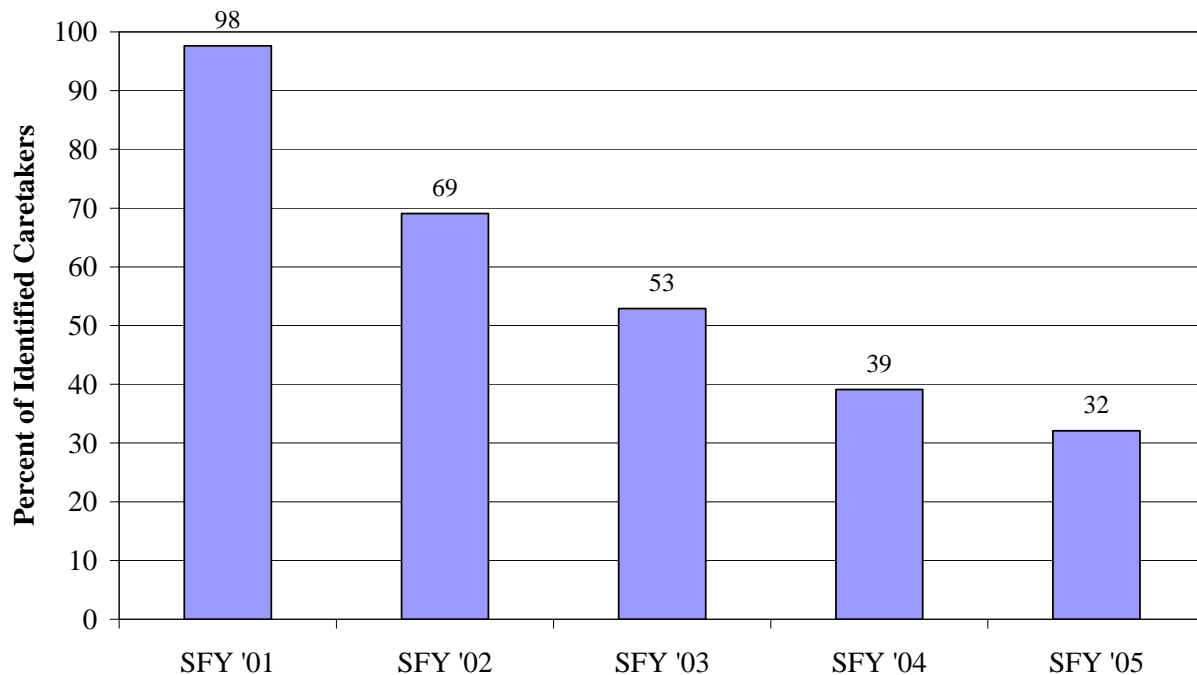
Race of Children

Figure 5 displays the racial distribution for the children living in the families served by the program over the last five years. There has been a significant and increasing proportion of other minority children served to an all time high of 25% in SFY 2005. At the same time, there was a steady rise and then fall in the proportion of White children served that corresponds with a steady decrease and then rise in the proportion of African American children served. Overall, however, the proportion of African American children served has decreased since SFY 2001.

**Figure 5. Race of Children**
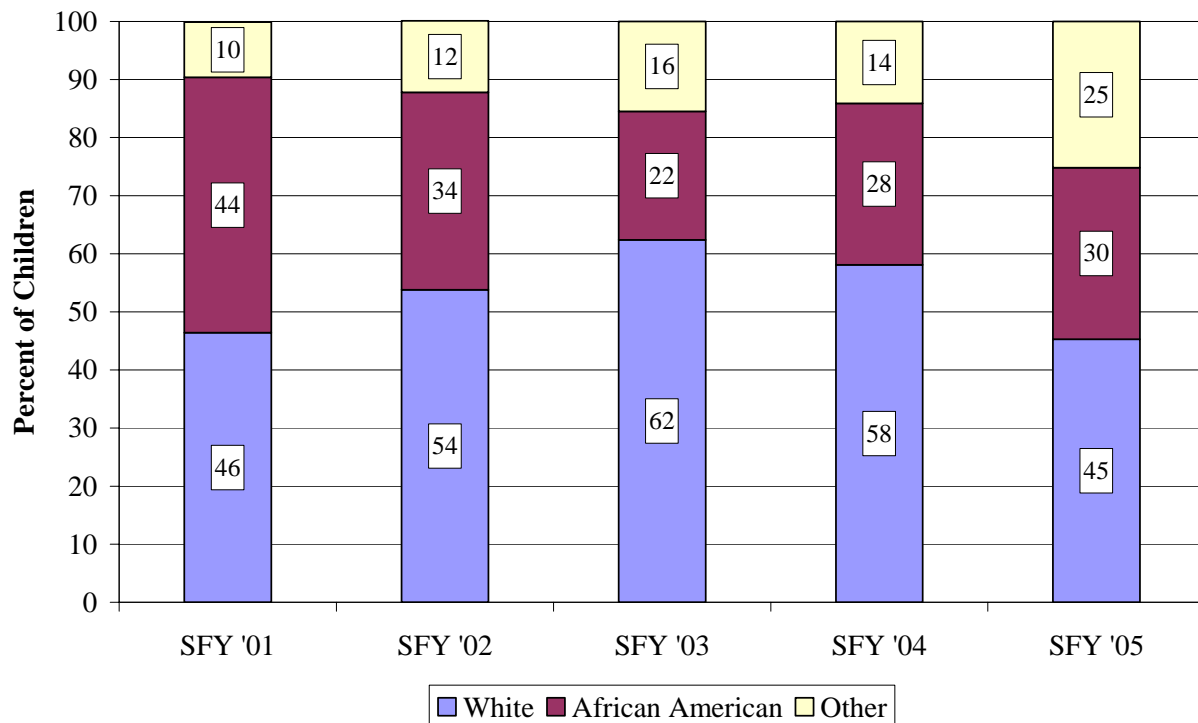
Age of Children

Figure 6 presents the information on ages of children served over the preceding 5 years. The age distribution of children has shifted slightly over the last five years. The proportion of children aged 0 to 5 has increased somewhat (from 40% in SFY 2001 to 55% in SFY 2005)

while the proportion of children aged 6 to 12 years has decreased to an all time low of 32% in

SFY 2005. There has been no real change in the proportion of children served aged 13 years and

older.

Figure 6. Age of Children
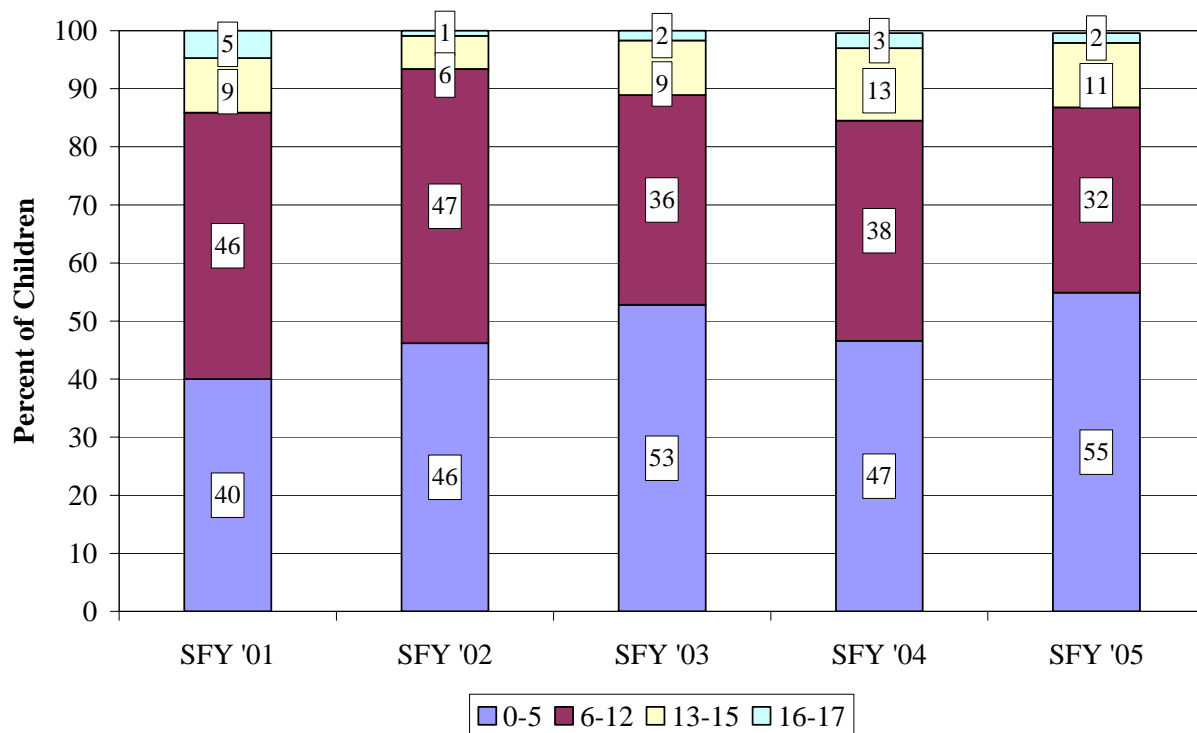
Primary Issues Affecting Children

The types of problems affecting children have fluctuated significantly over the last five

years. These data are presented in Figure 7. There has been a significant and decreasing

proportion of children presenting with the problems of family disruption, family violence, grief

and loss, and alcohol and/or other drug abuse. The proportion of children presenting with

problems of neglect, being undisciplined, out of parental control, and taking medications have

remained fairly stable over the last five years.

Figure 7. Primary Issues Affecting Children

Figure 7. Primary Issues Affecting Children

Legend:
- Neglect
- Undisciplined
- Family disruption
- Family violence
- Out of parental control
- Grief/loss
- Drug abuse
- Child taking medication
- Alcohol abuse
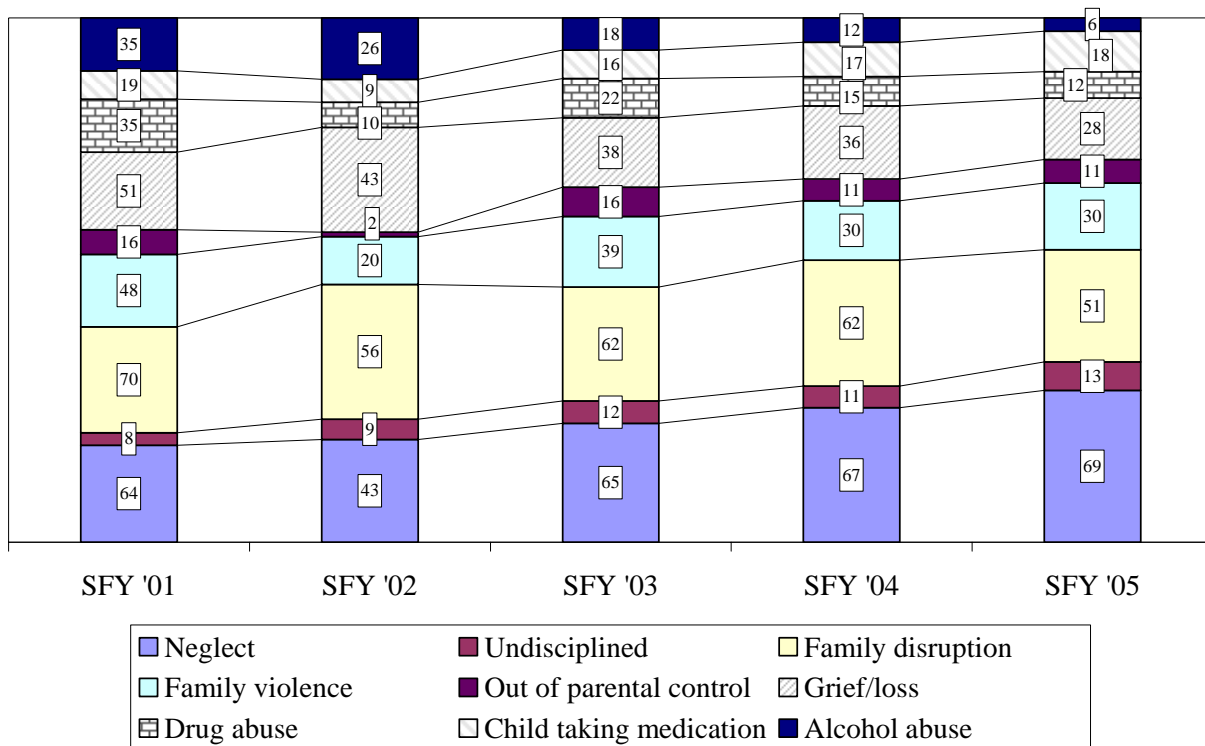
Children Living in the Home

Figure 8 illustrates the proportion of children living in the home at case opening as compared to case closing. Living in the home is defined as being in the home only, and does not include those living with a relative or with a family friend (as is the case for data summaries presented for the evaluation of FPS and IFPS.) Over the last five years there has been a significant variation in the number of children who are living in the home at the time of case opening (from a low of 9% in SFY 2002 to a high of 23% in SFY 2003). The number of children living in the home at case closure has also varied over the last five years, fluctuating between 35% and 50% and averaging 44% of those served.

Figure 8. Percent of Children Living in the Home at Case Opening and Case Closing
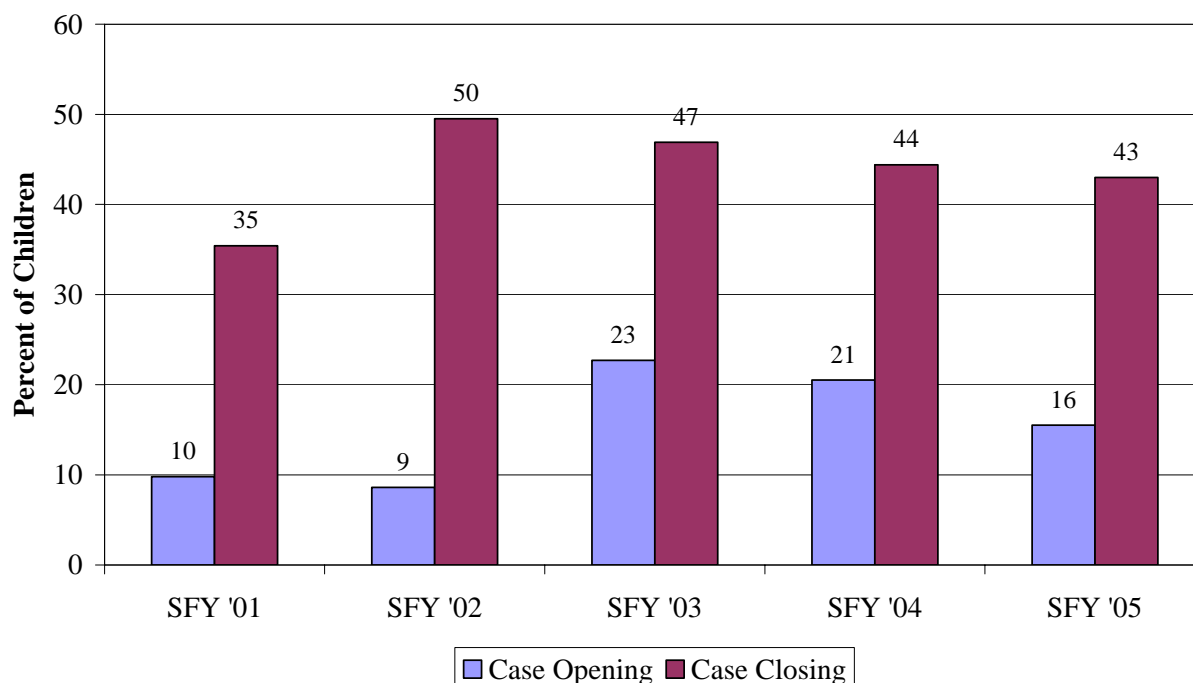
Children in DSS Legal Custody

Figure 9 displays the proportions of children that were in DSS legal custody at the time of case opening and case closure. The rates of DSS legal custody at case opening have remained quite constant over the last five years. The data indicate that nearly all children are in DSS legal custody at case opening (at least one child must be in custody as a requirement for reunification services), and that a substantial number are still in DSS legal custody at the time of case closure. These data are consistent with the child living arrangements and the rate of reunification observed at case closure.
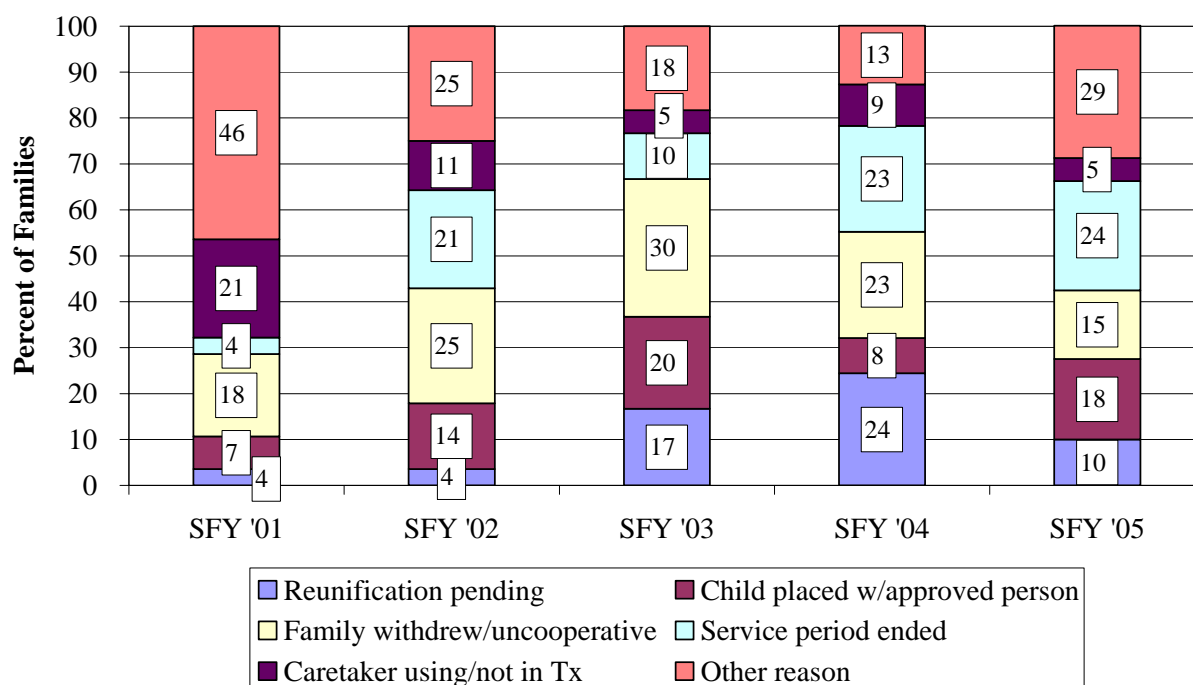
**Figure 9. Percent of Children in DSS Legal Custody at
Case Opening and Case Closing**
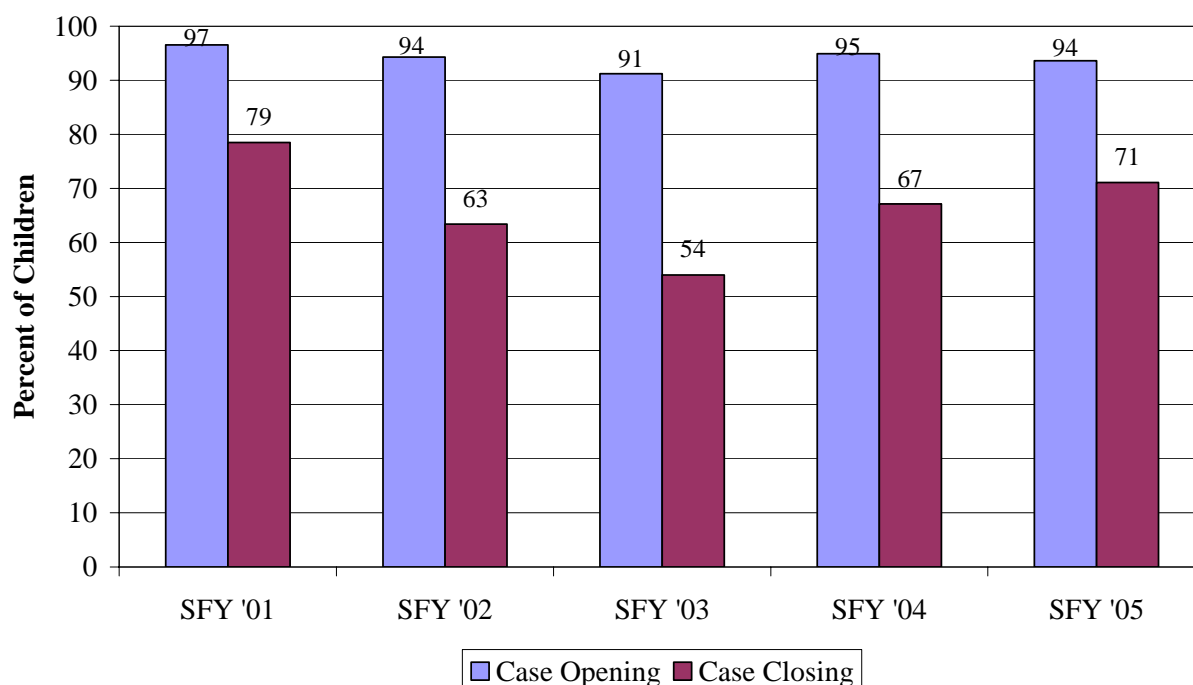
Reason for Case Closure

When FRS end, if *no* children have been reunified, caseworkers document the reason the case was closed. These data are presented in Figure 10. There has been significant variation in the reason cases closed over the last five years when children have not been reunified. There has been an overall increasing pattern in the proportion of cases closing where a reunification of the children is pending at the next scheduled court date, where the child(ren) have been placed with another court approved person, and when the service period has ended. At the same time, there has been a significant and decreasing proportion of cases closing because the identified caretaker was still using drugs and/or alcohol and not receiving treatment.
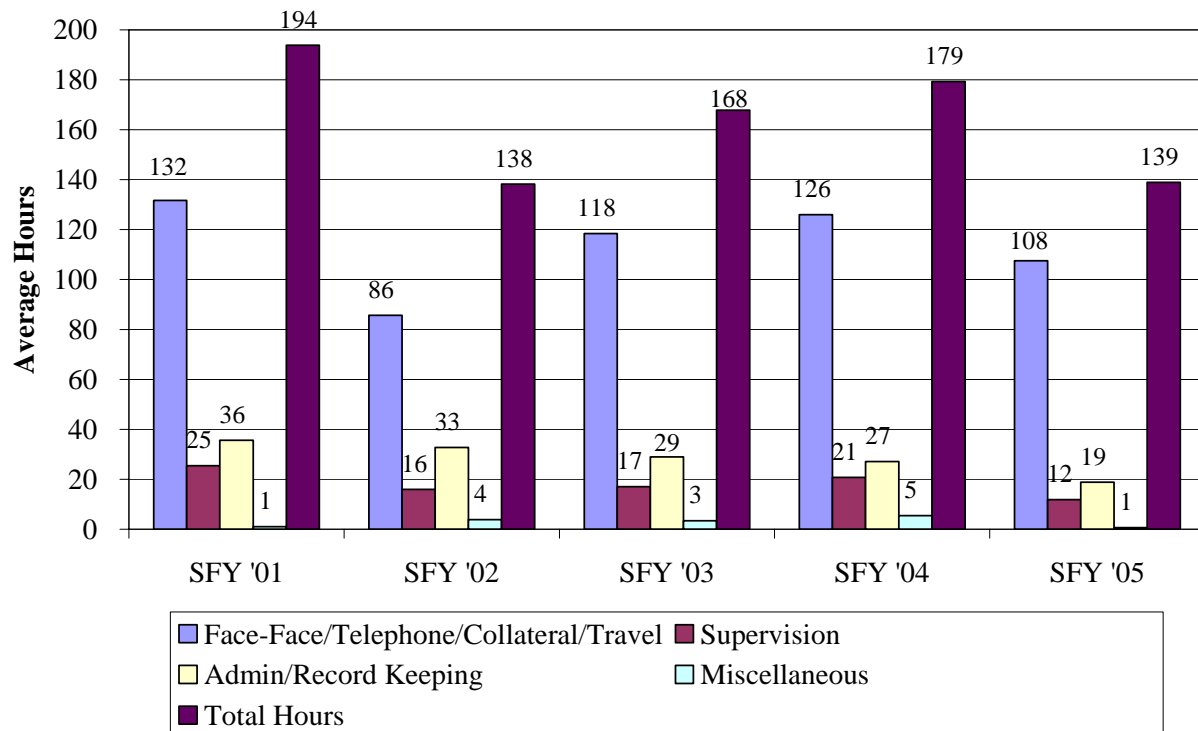
Figure 10. Reason for Case Closure when NO Children were Reunified

	Reunification pending	Child placed w/approved person
	Family withdrew/uncooperative	Service period ended
	Caretaker using/not in Tx	Other reason

Average Contact Hours with Families

Figure 11 shows data relating to required contact hours spent with families. This figure displays the average number of contact hours spent in each type of activity over the last five years. Workers have averaged a total of 164 contact hours with families. The majority of these hours were spent in face-to-face, telephone, collateral and travel contact. The distribution of hours spent in each type of contact has diminished over the last years, after a high of 194 total contact hours in SFY 2001.

Figure 11. Average Number of Contact Hours Over Life of Case

	SFY '01	SFY '02	SFY '03	SFY '04	SFY '05
Face-Face/Telephone/Collateral/Travel	132	86	118	126	108
Supervision	25	16	17	21	12
Admin/Record Keeping	36	33	29	27	19
Miscellaneous	1	4	3	5	1
Total Hours	194	138	168	179	139

Family Functioning: North Carolina Family Assessment Scale for Reunification

The North Carolina Family Assessment Scale for Reunification (NCFAS-R) provides information on family functioning in a variety of areas relevant to the typical FRS family, and provides pre-service and post-service information in order to measure change that occurs during the FRS service period. Changes in family functioning that occur during this period are related to stressors affecting families, which in turn, affect their ability to reunite by the end of the service period.

The NCFAS-R examines seven broad areas of interest and a number of more specific sub-areas. The broad areas, referred to as domains, include Environment, Parental Capabilities, Family Interactions, Family Safety, Child Well-Being, Caregiver/Child Ambivalence, and Readiness for Reunification. Each of these domains comprises a series of sub-scales. For example, the domain of Environment includes sub-scales on housing stability, safety in the community, habitability of housing, income/employment, financial management capability, adequacy of food and nutrition, personal hygiene, availability of transportation, and the "learning" environment.

Assessments are made by FRS workers at the beginning of the service period and again at the conclusion of service. The data of interest include both the absolute ratings at intake and closure and the change scores derived between the two assessment periods. For example, if a family received a rating of "-2" on the Environment domain at the beginning of service and received a "+1" at the end of service, the change score is +3, indicating movement of three scale increments in the positive direction. The change score is derived independently from the actual position of the scores on the scale; that is, a change from "0" to "+2" is considered to be of the same magnitude as a change from "-3" to "-1", or +2 in both cases. This strategy is deliberate in

that the change scores may indicate a meaningful change in the status of the family, or of the

trajectory of the family (i.e., deterioration to improvement), while at the same time

acknowledging that not all problems can be resolved completely during a brief intervention.

Ratings at Intake and Closure on NCFAS-R Domains

The NCFAS-R was implemented in FRS programs during SFY 2002. Findings in this

section relate to the total population of families served during the last 4 years in which FRS

services have been provided, SFY 2002 through SFY 2005. The database now contains full

NCFAS-R data for 368 families served during this period. Figures 12 through 18 present the

aggregate intake and closure ratings for the 7 domains on the NCFAS-R.

Data in Figure 12 suggest that the majority of families (60%) enter services with problem

ratings in the area of Environment. Forty percent of families are rated as being at

"Baseline/Adequate or above" at intake. At closure, three-fifths (63%) of families are

"Baseline/Adequate or above." There was substantial movement of the aggregate data towards

the positive end of the scale: the proportion of families rated as having serious environmental

problems was reduced from 23% to 12%, and those rated as having moderate problems were

reduced from 20% to 11%.

The Parental Capabilities domain on the NCFAS-R reflects an area where the majority of

families have problems at intake. Only 25% of families are rated as being at "Baseline/

Adequate or above" at intake. Although substantial improvement in this area is made by many

families, only 53% are rated "Baseline/Adequate or above" at closure. Nearly one-third (30%)

of families are rated as having moderate or serious problems in this area at closure.

The Family Interactions domain on the NCFAS-R reflects a similar pattern of change as presented for the Environment domain. These data are presented in Figure 14. At Intake, 39% of

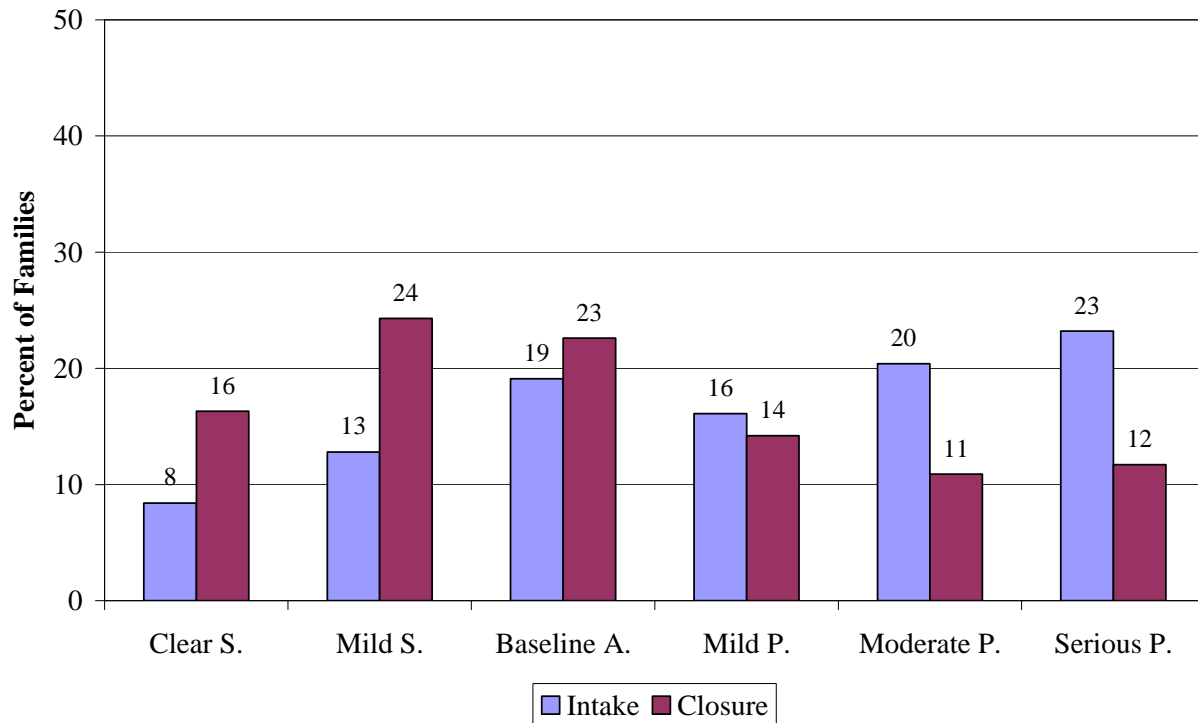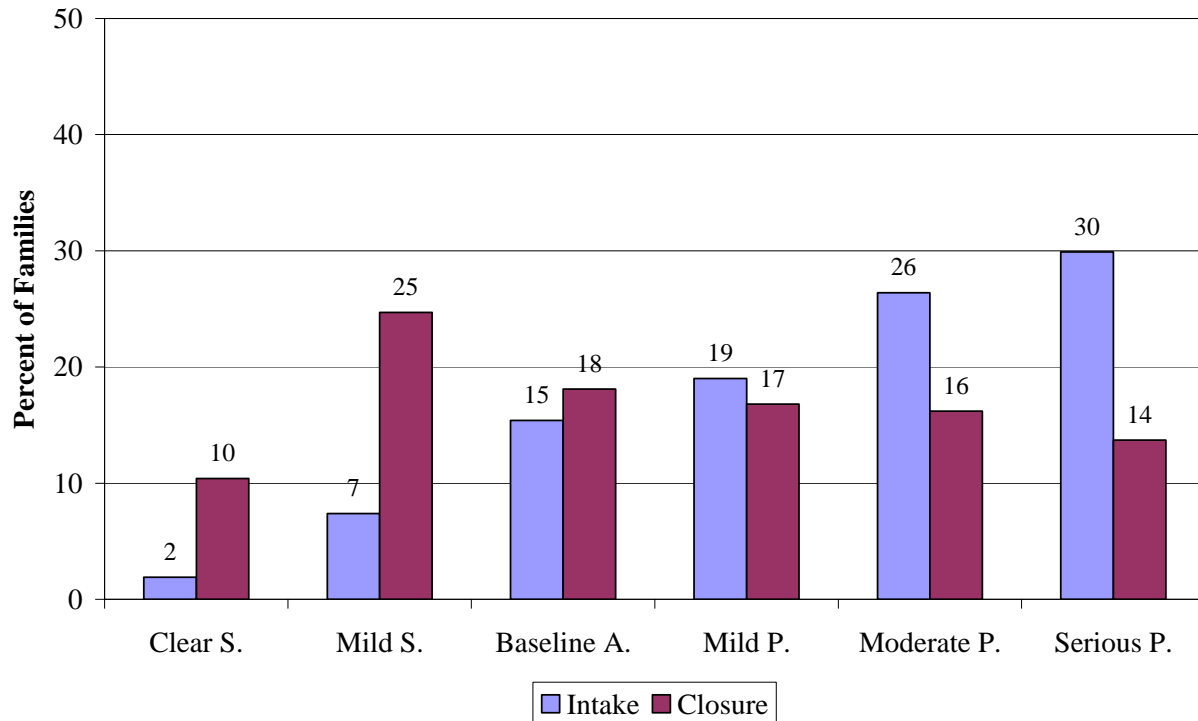## Figure 12. Environment Ratings at Intake and Closure

Percent of Families

	Clear S.	Mild S.	Baseline A.	Mild P.	Moderate P.	Serious P.
Intake	8	13	19	16	20	23
Closure	16	24	23	14	11	12

☐ Intake ■ Closure

Figure 13. Parental Capabilities Ratings at Intake and Closure

Percent of Families

	Clear S.	Mild S.	Baseline A.	Mild P.	Moderate P.	Serious P.
Intake	2	7	15	19	26	30
Closure	10	25	18	17	16	14

☐ Intake ■ Closure

families are rated as being at "Baseline/Adequate or above". After services, three-fifths (60%) are rated as "Baseline/Adequate or above."

The Family Safety domain on the NCFAS-R also reflects a similar pattern of change as presented for the Environment and Family Interactions domains. These data are presented in Figure 15. At Intake, 39% of families are rated as being at "Baseline/Adequate or above". After services, two-thirds (66%) are rated as "Baseline/Adequate or above."

Figure 14. Family Interactions Ratings at Intake and Closure
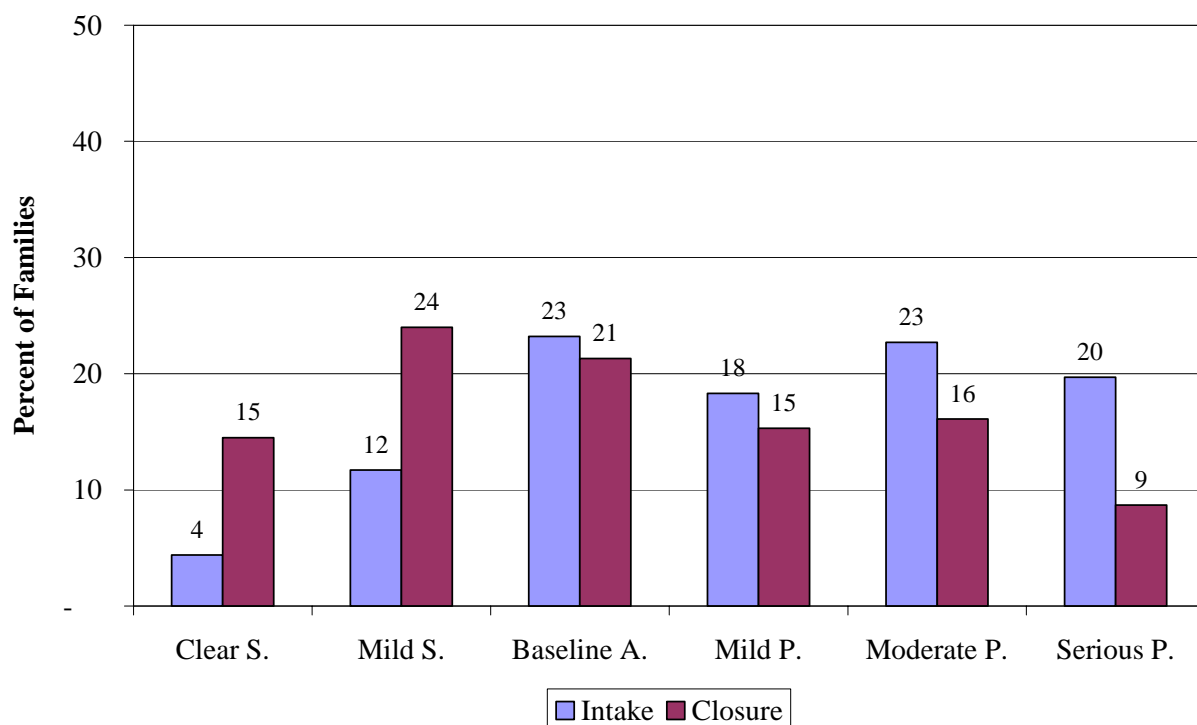
The next domain of assessment on the NCFAS-R is Child Well-Being. These data are presented in Figure 16. The assessed changes in Child Well-Being are the largest of any measured domain, with the majority (61%) of families rated as having problems in this area at the beginning of service. This is not altogether surprising since Child Well-Being issues, along with Parental Capability Issues, Family Interaction Issues and Family Safety Issues, are likely to

be the issues that initially bring the family to the attention of the referring agency. However, at the close of services, the large majority (69%) of families are at "Baseline/Adequate or above," and nearly half (45%) are rated in the "strengths" range.

Figure 15. Family Safety Ratings at Intake and Closure
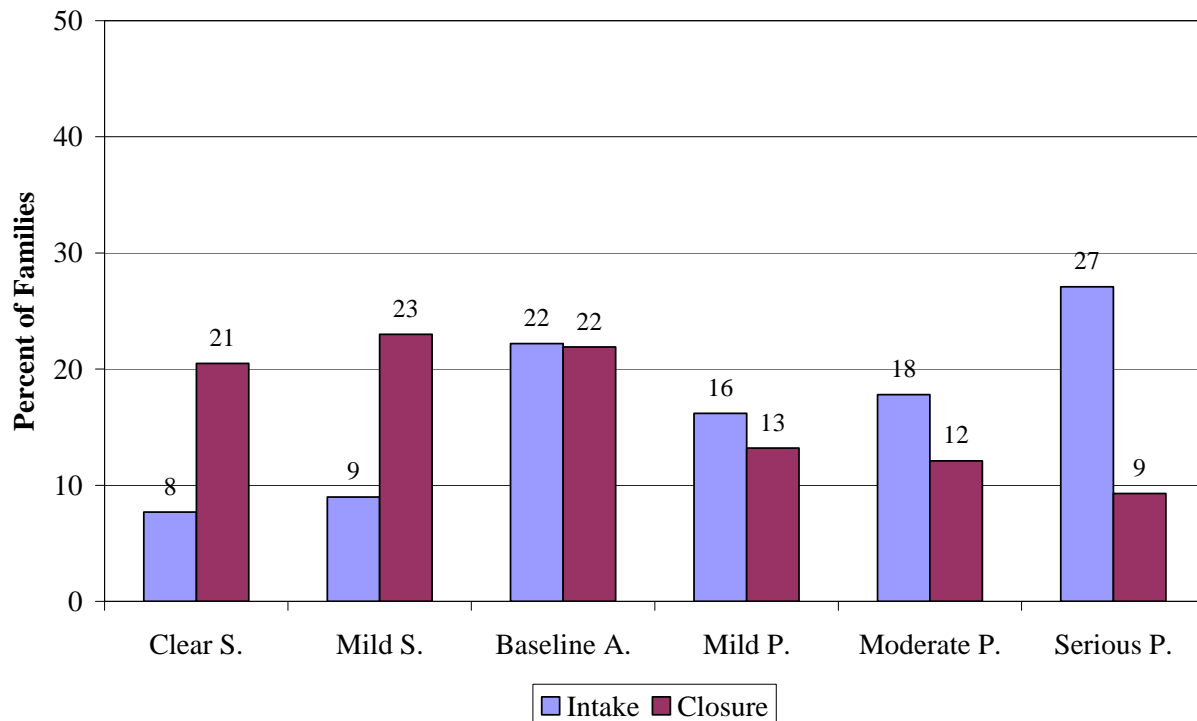
The last two domains on the NCFAS-R, Caregiver/Child Ambivalence and Readiness for Reunification, are domains specific to families attempting reunification. Results for the Caregiver/Child Ambivalence domain are presented in Figure 17. More families than on any other domain (57%) are rated "Baseline/Adequate or above" at intake on the Caregiver/Child Ambivalence domain. Although the majority of families (70%) are rated "Baseline/Adequate or above" at closure, this domain also shows the least overall change from intake to closure.

The Readiness for Reunification domain on the NCFAS-R reflects a similar pattern of change as presented for the Parental Capabilities domain, where the majority of families have

problems at intake. These data are presented in Figure 18. At Intake, only 29% of families are rated as being at "Baseline/Adequate or above". After services, half (51%) are rated as "Baseline/Adequate or above." One-third (36%) of families are rated as having moderate or serious problems in this area at closure.

Taken as a whole, the ratings on the NCFAS domains reflect the capacity of the FRS programs to influence the environment, parental skills, safety, interaction patterns and behavior, child well-being, and readiness for reunification to a substantial degree. Changes on Caregiver/Child Ambivalence, while evident, are less dramatic. This is due, at least in part, to the lower level of need recorded on this domains.

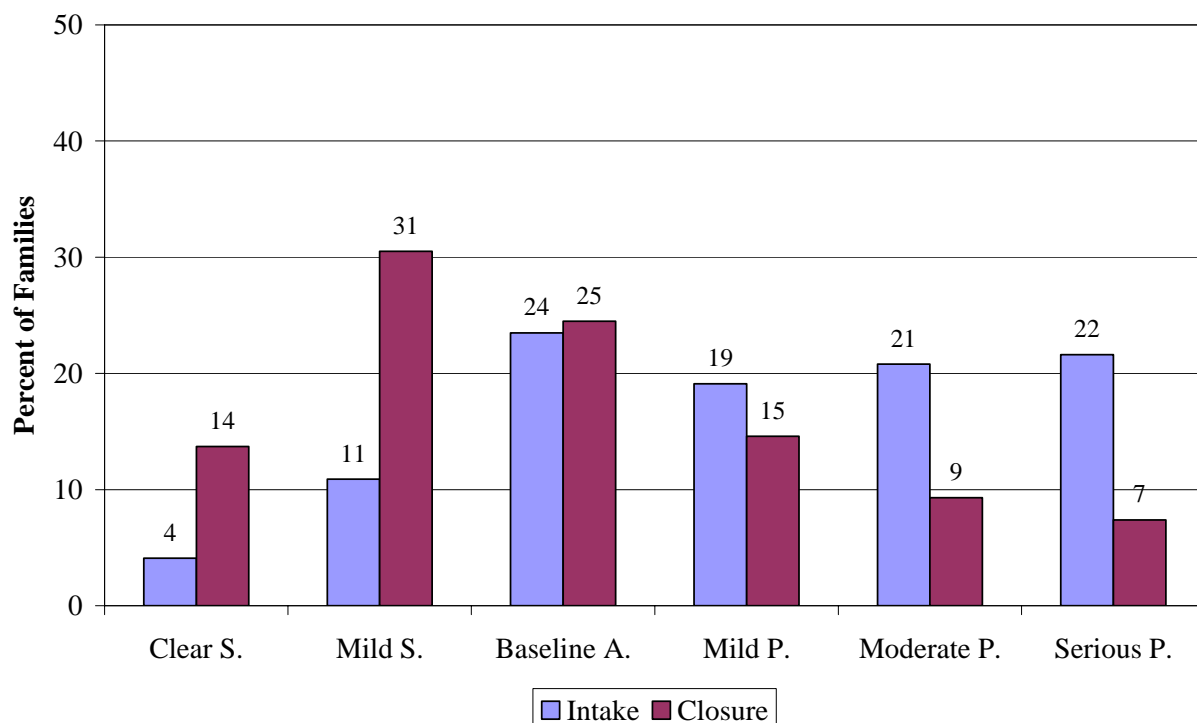**Figure 16. Child Well-Being Ratings at Intake and Closure**

Figure 17. Caregiver/Child Ambivalence Ratings at Intake and Closure

Percent of Families

	Clear S.	Mild S.	Baseline A.	Mild P.	Moderate P.	Serious P.
Intake	13	16	28	13	16	14
Closure	24	22	24	13	8	9
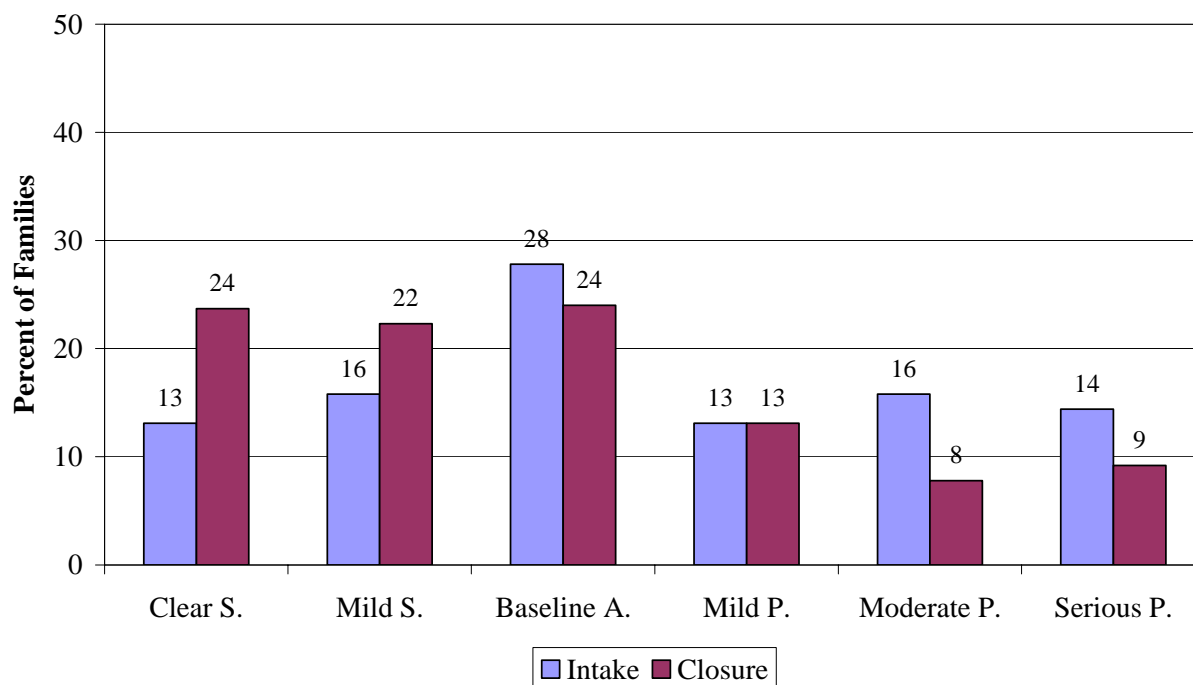
☐ Intake ■ Closure

Figure 18. Readiness for Reunification Ratings at Intake and Closure

Percent of Families

	Clear S.	Mild S.	Baseline A.	Mild P.	Moderate P.	Serious P.
Intake	5	9	15	15	21	35
Closure	19	19	13	13	13	23
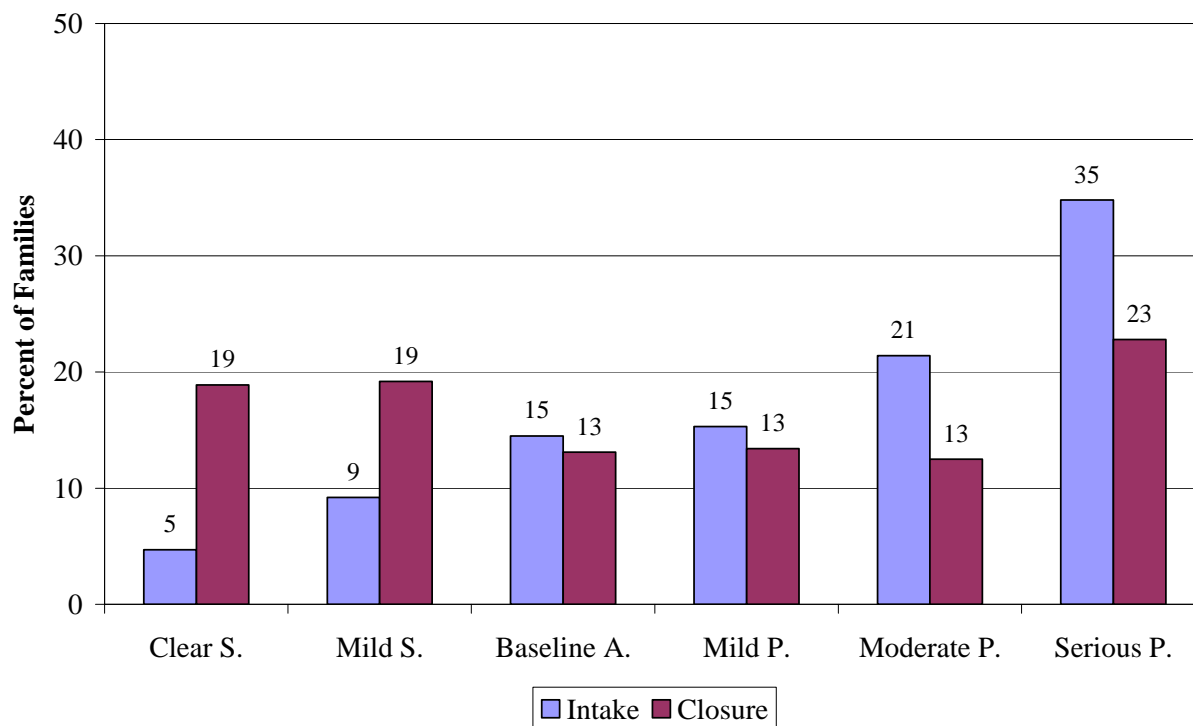
☐ Intake ■ Closure

Change from Intake to Closure on NCFAS-R Domains

The aggregate data presented in the preceding section indicate the "population" shifts following receipt of FRS services, but do not indicate the amount of change in individual families. Examination of individual family change requires the computation and analysis of the change scores derived on each domain for each family in the cohort. The specific changes that occurred on each of the domains for the 368 families served are presented in Table 12. These same data are presented graphically in Figure 19.

Table 12. Level of Change Experienced by Families on Each Domain of the NCFAS-R during Family Reunification Services

Domain	Level of Change Per Family (Percent of Families) N=368				
	-1 or more	0 (no change)	+1	+2	+3 or more
Environment	7.4%	42.5%	24.0%	14.4%	11.7%
Parental Capabilities	7.7%	33.0%	23.1%	21.2%	15.1%
Family Interactions	9.8%	35.0%	26.2%	18.9%	10.1%
Family Safety	5.5%	38.1%	23.6%	16.2%	16.7%
Child Well-Being	4.9%	38.2%	22.5%	17.0%	17.3%
Caregiver/Child Ambivalence	8.1%	50.1%	20.6%	13.9%	7.3%
Readiness for Reunification	10.9%	34.4%	21.8%	15.4%	17.5%

It can be seen in the graph that half of families do not change on the domain of Caregiver/Child Ambivalence (50%) and two-fifths (43%) do not change on the domain of Environment, but that approximately 2/3 of all families improve on the remaining domains: Parental Capabilities, Family Interactions, Family Safety, Child Well-Being, and Readiness for Reunification. Much of the improvement recorded is incremental (+1 or +2 scale intervals),

however, 10%-18% of all families improved 3 or more scale intervals. Because the NCFAS-R employs a 6-point scale, ranging from "serious problem" to "clear strength", a 3-point shift during an intervention is very large. Note also that a few families (5%-11%, depending on the domain) deteriorate during FRS services. Deterioration on any domain significantly increases the likelihood that reunification will not occur by the end of service.
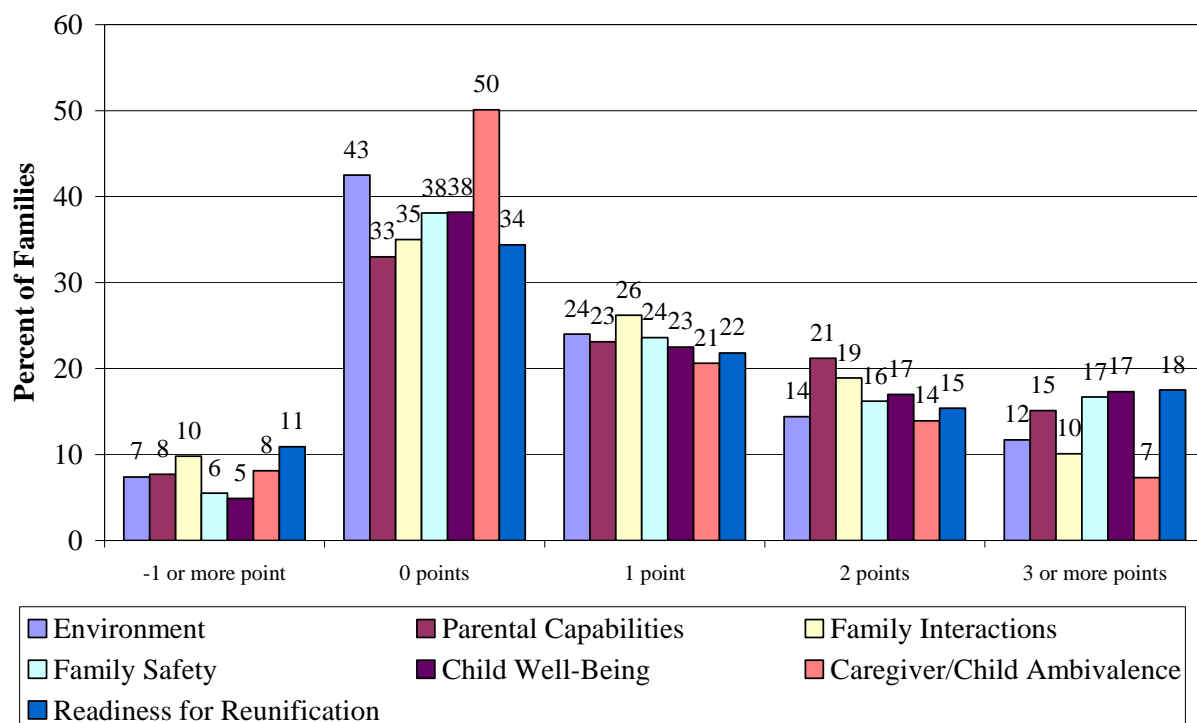
Figure 19. Level of Change Experienced on NCFAS-R Domains


Figure 20 shows the percent of families rated at "Baseline/Adequate or above" at intake and closure. Each "intake/closure" comparison indicates substantial positive change in the population of families served, although approximately one-third to half of families remain below baseline (i.e., in the problem range of ratings) on one or more domain at the time of case closure.

Figure 20. Overall Change Experienced on NCFAS-R Domains
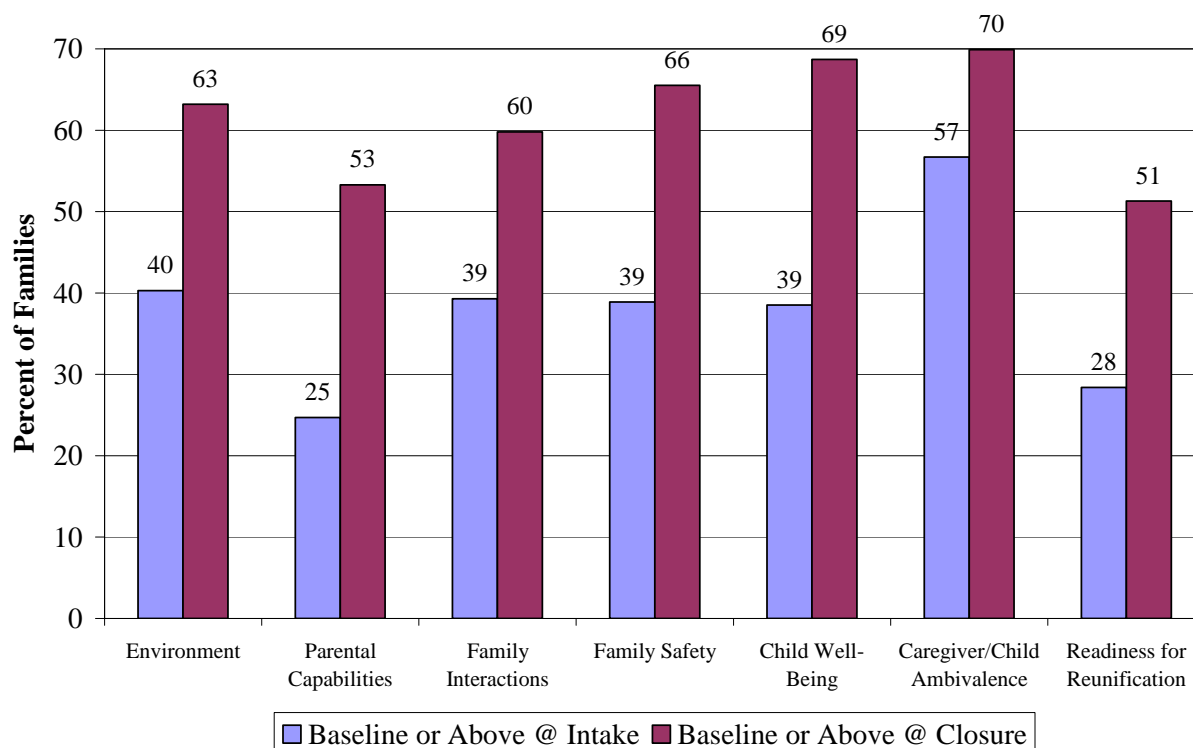
Reliability of the NCFAS-R

The FRS programs started out using the NCFAS-R Version R2.0 and became comfortable with its use. The NCFAS-R has had preliminary reliability and validity psychometrics established during a three-state field test of the instrument. The field test and reliability and validity statistics are available in the report : *Tailoring Intensive Family Preservation Services for Family Reunification Cases: Field Testing and Validation of the North Carolina Family Assessment Scale for Reunification*. This report is available and downloadable on the web at: http://www.nfpn.org. The sample size of more than 350 families comprised in this report is quite respectable for additional reliability and validity testing, and contributes substantially to the ongoing examination of the reliability of the scale items. The results of the reliability analysis are presented in Table 13.

The Alpha levels ranging from .76 to .95 reflect the internal consistency of the scale items. By convention among scale development theorists, Alphas above .7 are considered respectable, Alphas above .8 are considered strong, and Alphas above .9 are considered very strong. All but two of the Alphas are in the .8-.9 range, and the scale appears to be reliable when used in the present service environment with the present service population.

Table 13.   Reliability Analysis for the NCFAS-R, SFY 2002 through SFY 2005

Domain	Valid N	Number of Items	Alpha
Environment at Intake	367	10	.926
Environment at Closure	363	10	.949
Parental Capabilities at Intake	364	7	.853
Parental Capabilities at Closure	364	7	.922
Family Interactions at Intake	362	5	.813
Family Interactions at Closure	362	5	.857
Family Safety at Intake	363	6	.778
Family Safety at Closure	365	6	.843
Child Well-Being at Intake	359	8	.758
Child Well-Being at Closure	360	8	.802
Caregiver/Child Ambivalence at Intake	358	6	.872
Caregiver/Child Ambivalence at Closure	356	6	.904
Readiness for Reunification at Intake	358	6	.898
Readiness for Reunification at Closure	358	6	.946

Case Closure Ratings and Reunification

Compelling changes in domain score ratings are noted on all seven domains. While the movement that families experience on the NCFAS-R ratings during FRS services is interesting in its own right, it is more meaningful when the changes in the scale scores are related to other treatment outcomes. Of particular interest is the relationship between NCFAS-R scores and the reunification of children.

When the closure scores on the NCFAS-R are cross-tabulated with living in the home *a positive, statistically significant relationship is observed between strengths and the reunification of children, and between problems and failure to reunify* on all domains. On each of the domains, families in the "baseline/adequate to strengths" range at FRS closure are statistically over represented among families where all children are reunified. Similarly, at the end of service, families in the problem ranges at FRS closure are statistically over represented in families where one or more child has not been reunified. The strength of these relationships is quite compelling. For the 368 families served during SFY 2002, 2003, 2004 and 2005, the results are:

- for Environment: Chi Square = 56.026, df = 5, p=<.001;
- for Parental Capabilities: Chi Square = 88.234, df = 5, p<.001;
- for Family Interactions: Chi Square = 55.199, df = 5, p<.001;
- for Family Safety: Chi Square = 51.218, df = 5, p<.001;
- for Child Well-Being: Chi Square = 36.171, df = 5, p<.001;
- for Caregiver/Child Ambivalence: Chi Square = 60.670, df = 5, p<.001; and
- for Readiness for Reunification: Chi Square = 134.283, df = 5, p<.001.

These results indicate that FR*S interventions are capable of improving family functioning across all the measured domains, albeit incrementally, and these improvements in family functioning are statistically associated with family reunification*. These are important findings to FRS providers, administrators, policy executives and the legislature, not only in North Carolina, but also throughout the country. They are important because the reunification of these families is linked to measurable changes in family skills, strengths, circumstances, support, interaction patterns and a variety of other factors that comprise "family functioning."

It is noteworthy that most families, regardless of their intake ratings across all seven domains, improve only incrementally on two or three domains. Indeed, families may remain in

the "problem" ranges on one or more domains, even after successful FRS. It should not be

surprising that families do not change on all domains, because families are not likely to have

service plans that focus on all domains.

Findings of Special Interest from the Outcome-Focused Evaluation of North Carolina's Family Reunification Services Program

Some of the findings from this evaluation may present special opportunities for program improvement, or may require increased focus of attention from Family Reunification Program administrators. For example, while many children are reunited successfully with families, many other children are still in out-of-home placement at the time of case closure. The program data indicate that some children (about 15%) have a reunification pending for their next court hearing following Family Reunification Services case closure. If all, or even most of this 15% are reunified with family, the success statistics for the program would be increased substantially. Family Reunification Services administrators may want to examine ways to capture these data and relate them to the program.

Another factor that may work to the detriment of apparent program success, particularly when compared to other DSS programs, is the definition of "home" used in the reunification criteria for success. Presently "home" means literally the home of the parent, whereas in the IFPS and FPS programs "home" is defined as the original caretaker's home, the home of a relative, or that of an approved family friend. To be sure, there are differences in the context of the programs (e.g., the concept of a placement being prevented by involving a family friend is qualitatively quite different that thinking about a family friend in the context of "reunification"), but some broadening of the definition of success within an appropriate context may both increase the likelihood of success for families and increase the success statistics for the program.

There appears to be a great deal of stability in some measures when examined over a five-year trend line beginning in SFY 2001. For example, the overall number of families and children served has remained fairly constant (after increasing between 2001 and 2002). Also relatively stable has been the primary issues affecting caretakers, and with the exception of an

increase in the number of children suffering neglect and a decrease in child-use of alcohol and other drugs, the problems affecting children have also held fairly constant. However, there appears to have been a notable decrease in the time devoted to these reunification cases during the past three years. In SFY 2003 the time spent per case peaked at about 190 hours per case. This amount decreased to about 114 hours per case in SFY 2005. The distribution of time within each case (i.e., time spent in face-to-face contact, during supervision, during admin/record keeping, etc.) remained fairly constant, but there was an overall decrease of 40% in the total time devoted to each case. There is no apparent reason in the program data for this time reduction, although it may be related to budget issues or administrative decisions not reflected in the program data.

The North Carolina Family Assessment Scale for Reunification reflects substantial improvement in family functioning across all domains of measurement as a result of Family Reunification Services. There are two domains, however, where about one half of families are still "below baseline" at closure: Parental Capabilities and Readiness for Reunification. Although many families improve on these domains, Family Reunification Services administrators may wish to examine the reasons that only half of all families served are achieving "baseline or above" status in these areas during the period of service.

Finally, although quantitative data on model fidelity are scant, qualitative data suggest a great deal of variability in the program models operated under the Family Reunification Services program. For example, some DSSs may refer families to FRS very early in the lives of those cases, and other may not refer them until other, less intensive or less costly options have been tried. In the first instance, the FRS provider has a better opportunity to work with the family prior to ambivalence setting in. Program elements like case load sizes, levels of intensity within

different stages of the case, length of and intensity of post reunification step down services, and

the like, are reported to vary considerably. DSS administrators may want to consider a more

structured approach to funding FRS programs during the next round of program bids in order to

reduce the sources of variability among programs that complicates the testing of model efficacy.

For example, DSS may want to identify two or three program models for reunification and invite

potential service providers to select one of the models and submit a quote for the cost of

operating the chosen model, rather than creating numerous disparate or even unique models.

Such an approach would permit DSS to test model fidelity as well as the efficacy of the service,

and over time to move towards the most effective and efficient service delivery models.

APPENDIX A

Provider List for SFY 2004-2005
Family Reunification Programs

Region	Provider	Contact Person	Counties Served
Region 1	Mountain Youth Resources PO Box 99 Webster, NC 28779	Devona Finley (828) 586-8958 Fax: (828) 586-0649	Buncombe, Cherokee, Clay, Graham, Haywood, Henderson, Jackson, Macon, Madison, Swain, Transylvania
Region 2	Appalachian Family Innovations 204 Avery Ave. Morganton, NC 28655	Brenda Caldwell (828) 433-7187 Fax: (828) 437-8329	Avery, Burke, Caldwell, Cleveland, Lincoln, McDowell, Mitchell, Polk, Rutherford, Yancey
Region 2 (subcontract)	Gaston Co. DSS 330 N. Marietta St. Gastonia, NC 28052	Penny Plyler (704) 862-7989 Fax: (704) 862-7885	Gaston
Region 3	Rainbow Center, Inc. 517 Boston Ave. North Wilksboro, NC 28659	Glenda Andrews (336) 667-3333 Fax: (336) 667-0212	Alleghany, Ashe, Watauga, Wilkes, Yadkin
Region 3	Appalachian Family Innovations 204 Avery Ave. Morganton, NC 28655	Brenda Caldwell (828) 433-7187 Fax: (828) 437-8329	Alexander, Iredell
Region 3	Community LINK 601 East 5th St. Suite 220 Charlotte, NC 28202	Tomico Evans (704) 943-9492 Fax: (704) 973-9519	Mecklenburg
Region 3	Catawba Co. DSS PO Box 669 Newton, NC 28658	Paul Mastrovito (828) 261-2517 Fax: (828) 328-4729	Catawba
Region 4	Youth Opportunities 205 N. Spruce St. Suite #3 Winston-Salem, NC 27101	Stan Meloy (336) 724-1462 Fax: (336) 724-1464	Davie, Forsyth, Stokes
Region 4 (subcontract)	Exchange Club/SCAN 500 West Northwest Blvd. Winston-Salem, NC 27105	George Bryan (336) 748-9028 Fax: (828) 748-9030	Rockingham, Surry
Region 4	Community LINK 601 East 5th St. Suite 220 Charlotte, NC 28202	Tomico Evans (704) 943-9492 Fax: (704) 973-9519	Cabarrus, Davidson, Rowan, Stanly, Union
Region 5	The Family Center in Alamance[1] 711 Hermitage Rd. Burlington, NC 27215	Stephanie Sox (336) 438-2072 Fax: (828) 438-2010	Alamance, Orange
Region 5	Family Services of the Piedmont 315 East Washington St. Greensboro, NC 27401	Sue Spidell (336) 387-6161 Fax: (336) 387-9167	Anson, Guilford, Montgomery, Randolph
Region 6	The Family Resource Center of Raleigh, Inc. 1035 Halifax St. Raleigh, NC 27601	Kim Best (919) 834-2136 Fax (919) 834-1377	Chatham, Durham, Franklin, Hoke, Lee, Moore, Richmond, Scotland, Wake
Region 7	Martin County Community Action, Inc. 314 Ray St. Williamston, NC 27895-0806	Tina Garrett (252)792-7111 Fax: (252) 792-1248	Bladen, Brunswick. Columbus, Cumberland, Harnett, New Hanover, Pender, Robeson, Sampson

Region	Provider	Contact Person	Counties Served
Region 8	Choanoke Area Development Assoc. PO Box 530 Rich Square, NC 27869-0530	Joyce Scott (252) 537-9304 Fax: (252) 539-2048	Edgecombe, Halifax, Nash, Warren
Region 8	Methodist Home for Children PO Box 10917 Raleigh, NC 28605	Tom Fleetwood (919) 833-2834 Fax (919) 755-1833	Duplin, Greene, Johnston, Wayne, Wilson
Region 9	Martin County Community Action, Inc. 314 Ray St. Williamston, NC 27895-0806	Tina Garrett (252)792-7111 Fax: (252) 792-1248	Bertie, Camden, Chowan, Currituck. Gates, Hertford, Martin, Northampton, Pasquotank, Perquiminans, Pitt
Region 10	Methodist Home for Children PO Box 10917 Raleigh, NC 28605	Tom Fleetwood (919) 833-2834 Fax (919) 755-1833	Beaufort, Cartaret, Craven, Dare, Hyde, Jones, Lenoir, Onslow, Pamlico, Tyrrell, Washington

[1]The actual contract for this area was with Exchange SCAN, however they were acting as a fiscal agent only.

Program Allocations and Expenditures for SFY 2004-2005
Family Reunification Programs

Region	Provider	Allocation	Actual Expenditure
Region 1	Mountain Youth Resources	$350,000	$349,501.06
Region 2	Appalachian Family Innovations	$136,334	$142,153.00
Region 2	Gaston Co. DSS (subcontract)[1]	$88,666	$69,334.00
Region 3	Rainbow Center, Inc.	$65,000	$52,891.00
Region 3	Appalachian Family Innovations	$65,000	$65,000.00
Region 3	Community LINK	$80,000	$153,215.00
Region 3	Catawba Co. DSS	$65,000	$65,000.00
Region 4	Youth Opportunities	$70,000	$64,774.22
Region 4	Exchange SCAN (subcontract)[1]	$25,000	$25,000.00
Region 4	Community LINK	$114,000	$110,789.38
Region 5	The Family Center in Alamance	$80,000	$66,232.08
Region 5	Family Services of the Piedmont	$80,000	$78,087.29
Region 6	The Family Resource Center of Raleigh, Inc.	$200,000	$198,145.10
Region 7	Martin County Community Action, Inc.	$200,000	$179,107.67
Region 8	Choanoke Area Development Assoc.	$74,000	$74,000.00
Region 8	Methodist Home for Children	$78,000	$77,972.13
Region 9	Martin County Community Action, Inc.	$50,000	$32,277.31
Region 10	Methodist Home for Children	$50,000	$49,883.35
TOTALS		**$1,871,000**	**$1,853,362.59**

[1]Programs designated as subcontracts are subcontracts of the agency listed directly above them. The contract with the Division represents the sum of the allocation of the primary contractor and the subcontract.